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Fill in this information to identify your cas	e:	
United States Bankruptcy Court for the: Eastern District of Virginia	* * * * * * * * * * * * * * * * * * * *	CLERK US BAHKRUPTCY COURT NORFOLK DIVIDIAN
Case number (# known):	Chapter you are filing under:  ☐ Chapter 7 ☐ Chapter 11	2019 OCT -1 A 10: 29
	Chapter 12 Chapter 13	Check if this is an amended filing

Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your	Lakisha	
	government-issued picture identification (for example,	First name	First name
	your driver's license or	Shante	
:	passport).	Middle name	Middle name
	Bring your picture	Brown	
:	identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or	First name  Middle name	First name
:	maiden names.	Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social Security	xxx - xx - 4 4 3 2	XXX — XX —
	number or federal	OR	OR
- 1	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

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Debtor 1	Lakisha Sha	inte Brown Iame Last Name	Case number (# snown)_
	Productive Angles (Control of Control of Con	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
and f	business names Employer iffication Numbers you have used in	☑ I have not used any business names	or EINs.
	ast 8 years	Business name	Business name
	le trade names and business as names		
Gonig	business as names	Business name	Business name
		EIN — - — — — — — — —	EIN
		EIN	EIN — ~ — — — — — — —
5. Whei	re you live	denensissa koromenen kuusika ee esittämistä <sub>e</sub> nsä ontimisinjan erhiteeta ja n-an losse een uutamatum	If Debtor 2 lives at a different address:
		404 Opal Ave	
		Number Street	Number Street
		Virginia Beach VA	23462-5517-
		City State	ZIP Code City State ZIP Code
		County	County
		If your mailing address is different from above, fill it in here. Note that the count any notices to you at this mailing address	will send yours, fill it in here. Note that the court will send
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State	ZIP Code City State ZIP Code
	you are choosing	Check one:	Check one:
	district to file for ruptcy	Over the last 180 days before filing the I have lived in this district longer than other district.	is petition, in any  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Det	otor 1	Lakisha First Name	Shante Middle Name	Bro Last Na	OWN		Case number (##	grown)_
Pa	rt 2:	Tell the Cour	t About \	our Bankr	uptcy Case			
7.	The cl	hapter of the ruptcy Code ye			or a brief description of e (Form 2010)). Also, go t			U.S.C. § 342(b) for Individuals Filing he appropriate box.
	are ch under	noosing to file	ū	Chapter 7				
				Chapter 1	1			
				Chapter 1	2			
				Chapter 1	3			
8.	How y	you will pay th	C	local cour yourself, y submitting with a pre I need to Applicatio I request By law, a less than pay the fe	t for more details about ou may pay with cast your payment on your printed address.  pay the fee in install on for Individuals to Pathat my fee be waive judge may, but is not 150% of the official poe in installments). If you	thow you not he, cashier's cur behalf, you ments. If you may required to, you coverty line the ou choose the head of the coverty line the ou choose the head in the coverty line the ou choose the head of the coverty line the cov	nay pay. Typical check, or money ur attorney may us choose this of Fee in Installment request this opiwaive your fee, at applies to younis option, you m	eck with the clerk's office in your ly, if you are paying the fee order. If your attorney is pay with a credit card or check obtion, sign and attach the ents (Official Form 103A).  Ition only if you are filing for Chapter 7, and may do so only if your income is ar family size and you are unable to nust fill out the Application to Have the
				Chapter /	<i>Filing Fee Waived</i> (C	mciai Form	103B) and file it	with your petition.
	Hove	ve you filed for						· · · · · · · · · · · · · · · · · · ·
9.	bankr	uptcy within t		No	Eastern Virginia		02/15/201	Case number 13 - 705 09
	last 8	years?	•	Yes. Distric	at <u>Luotom viigima</u>	When	MM / DD / YYYY	Case number 10001
				Distric	at	When	MM / DD / YYYY	Case number
				Dinkel		140		
				Distric	···	When	MM / DD / YYYY	Case number
10.	Are ar	ny bankruptcy		3 No				
		pending or be by a spouse wi		Yes. Debto	DF			Relationship to you
	not fil	ing this case ver by a busines	vith	Distric	at	When		Case number, if known
		er, or by an	••				MM/DD/YYYY	
				Debto	or			Relationship to you
				Distric	et	When	MM / DD / YYYY	Case number, if known
							MMITUUTITI	
	Do yo reside	u rent your ence?		Yes. Has	o line 12. your landlord obtained a	n eviction judg	nment against you	?
					lo. Go to line 12.		<b>.</b>	
					es. Fill out <i>Initial Statem</i> art of this bankruptcy pe		Eviction Judgmen	t Against You (Form 101A) and file it as
				,				

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Deplor I		Shan	Case number (# known)					
art 3:	Report Abou	ıt Any B	usiness	es You Own as a S	Sole Proprietor			
	ou a sole pro y full- or part-		_	Go to Part 4.				
	1ess?		☐ Yes.	Name and location of b	business			
busine individ separa	proprietorship is ess you operate a lual, and is not a ate legal entity s oration, partners	as an uch as		Name of business, if any				
LLC.	b 4b			Number Street				
sole p	have more than roprietorship, us ite sheet and att	e a						
to this	petition.			City	State ZIP Code			
				Check the appropriate	e box to describe your business:			
				Health Care Busine	ness (as defined in 11 U.S.C. § 101(27A))			
				☐ Single Asset Real E	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as det	lefined in 11 U.S.C. § 101(53A))			
				☐ Commodity Broker	er (as defined in 11 U.S.C. § 101(6))			
				☐ None of the above	3			
Chap Bank are you debto For a o	3. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see		can set a most recany of the	appropriate deadlines. It cent balance sheet, state lese documents do not of I am not filing under Ch	11, the court must know whether you are a small business debtor so that it. If you indicate that you are a small business debtor, you must attach your atement of operations, cash-flow statement, and federal income tax return or if it exist, follow the procedure in 11 U.S.C. § 1116(1)(B).  Chapter 11.  Deter 11, but I am NOT a small business debtor according to the definition in			
11 U.S	S.C. § 101(51D).		the Bankruptcy Code.  2 Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the					
			Tes.	Bankruptcy Code.	oter 11 and 1 am a small business debtor according to the definition in the			
Part 4:	Report if Yo	u Own o	r Have /	Any Hazardous Pro	operty or Any Property That Needs Immediate Attention			
	u own or hav		<b>☑</b> No					
allege of im- identi	erty that posesed to pose a to minent and fiable hazard c health or sa	hreat to	☐ Yes.	What is the hazard?				
prope imme	you own any erty that need diate attention	s n?		If immediate attention	on is needed, why is it needed?			
perish that m	ample, do you o able goods, or in ust be fed, or a l eeds urgent repa	restock ouilding						
				Where is the property	ty?			
					City State ZIP Code			

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Debtor 1

Lakisha

Shante

Brown

Case number (# know

Part 5:

# Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

Abo	out	De	btor	1

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before ! filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

l received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

i am	not	requ	ired	to	receive	e a	briefing	about
cred	it co	unse	dina	be	cause	of	:	

☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

■ Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

#### I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 19-73637-SCS Doc 1 Filed 10/01/19 Entered 10/01/19 10:37:19 Desc Main Document Page 6 of 72

Debtor 1		nante Brown	Case number (##	noteri)
	First Name Middle	Name Last Name	·	
Part 6:	Answer These O	uestions for Reporting P	III	
rait o.	Allawel Titese (c	<u> </u>	orimarily consumer debts? Consumer de	hts are defined in 11 U.S.C. \$ 101/8\
	it kind of debts do have?	as "incurred by an in	ndividual primarily for a personal, family, or ho	
			<del></del> -	
			orimarily business debts? Business debts ss or investment or through the operation of the	
		No. Go to line 10  Yes. Go to line 1		
		16c. State the type of de	bts you owe that are not consumer debts or bu	usiness debts.
17. <b>Are</b>	you filing under	ra (der erreinste sammer sammer sammer sammer sammer sammer erreinste erreinste erreinste erreinste erreinste er	TERROR PRINCES TO BURN IN TO COMPANY THE REST CONTINUES AND CONTINUES CONTIN	The Property Code (APT) Addressed Book Code Property Williams Williams Williams (Apply of Code) to the code of the Code (Apply of Code) to the code of the Code (Apply of Code) to the code of the Code (Apply of Code) to the code of the Code (Apply of Code) to the code of the Code (Apply of Code) to the code of the Code (Apply of Code) to
Cha	pter 7?	_	nder Chapter 7. Go to line 18.	
	ou estimate that aft exempt property is	er Yes. I am filing under administrative e	Chapter 7. Do you estimate that after any exexpenses are paid that funds will be available to	empt property is excluded and ordinate to unsecured creditors?
	uded and Inistrative expenses	No		
are	paid that funds will I	be Li Yes		
	lable for distribution nsecured creditors?		umbr somkarradenin NV.s.s. is wideliksid kiristi. Obskalar (1995 belaiktivus errollen er sebennin 1905 belaikti	. CHTTE COTO STORMAN PROSESS SERVICE S
	many creditors do	<b>2</b> 1-49	1,000-5,000	25,001-50,000
you owe	estimate that you ?	□ 50-99 □ 100-199	5,001-10,000 10,001-25,000	☐ 50,001-100,000 ☐ More than 100,000
		200-999		THOIR BIRT 100,000
	much do you	\$0-\$50,000	41,000,001-\$10 million	\$500,000,001-\$1 billion
	mate your assets to vorth?	\$50,001-\$100,000 \$100,001-\$500,000	□ \$10,000,001-\$50 million □ \$50,000,001-\$100 million	\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion
		\$500,001-\$900,000	\$100,000,001-\$100 million	☐ More than \$50 billion
20. How	much do you	\$0-\$50,000	□ \$1,000,001-\$10 million	\$500,000,001-\$1 billion
estir to be	mate your liabilities	\$50,001-\$100,000	□ \$10,000,001-\$50 million	\$1,000,000,001-\$10 billion
(O D	# r	\$100,001-\$500,000 \$500,001-\$1 million	□ \$50,000,001-\$100 million □ \$100,000,001-\$500 million	☐ \$10,000,000,001-\$50 billion☐ More than \$50 billion
Part 7:	Sign Below			
For you	1	I have examined this peti correct.	ition, and I declare under penalty of perjury that	nt the information provided is true and
			ider Chapter 7, I am aware that I may proceed Code. I understand the relief available under e	
			me and I did not pay or agree to pay someone tained and read the notice required by 11 U.S.	
		request relief in accorda	ance with the chapter of title 11, United States	Code, specified in this petition.
			lse statement, concealing property, or obtaining an result in fines up to \$250,000, or imprison 1519, and 3571.	
		* Jalua	Sprato R *	
		Signature of Debtor 1		re of Debtor 2
		Executed on 10/01/		
		MM /	DD /YYYY	MM / DD /YYYY

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Debtor 1	Lakisha First Name	Shante	Brown	Case number (# known)			
For your attorney, if you are represented by one  If you are not represented by an attorney, you do not need to file this page.		ou are ented o not	I, the attorney for the debtor(s) r to proceed under Chapter 7, 11, available under each chapter for the notice required by 11 U.S.C.	amed in this petition, declare that I have informed the debtor(s) about eligibility 12, or 13 of title 11, United States Code, and have explained the relief which the person is eligible. I also certify that I have delivered to the debtor(s) § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no he information in the schedules filed with the petition is incorrect.			
	, -		Signature of Attorney for Debtor	Date			
			Printed name Firm name Number Street				
			City	State ZIP Code			
			Contact phone	Email address			
			Bar number	State			

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Debtor 1	Lakisha First Nume	Shante Middle Nerree	Brov Lest Name	<b>v</b> n	Cas	e number (Finom)		
on the property of	o polovini od žioje i izali izali.	a,	ar t		1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	the second of		
For you if you are filing this bankruptcy without an attorney  If you are represented by an attorney, you do not		l by ot	should und themselves consequen To be succe	lerstand that m s successfully. ces, you are st ssful, you must c	any people find it ex Because bankruptcy rongly urged to hire orrectly file and handle	yourself in bankruptcy court, but you stremely difficult to represent y has long-term financial and legal a qualified attorney.  your bankruptcy case. The rules are very rights. For example, your case may be		
need to i	ile this page.		dismissed be hearing, or o firm if your o	ecause you did no coperate with the ase is selected fo	ot file a required docum e court, case trustee, U or audit. If that happens	nent, pay a fee on time, attend a meeting or .S. trustee, bankruptcy administrator, or audit , you could lose your right to file another efit of the automatic stay.		
			court. Even i in your scher property or p also deny yo case, such a cases are ra	f you plan to pay dules. If you do n roperly claim it a u a discharge of s destroying or h ndomly audited t	a particular debt outsic ot list a debt, the debt i s exempt, you may not all your debts if you do iding property, falsifying o determine if debtors I	dules that you are required to file with the de of your bankruptcy, you must list that debt may not be discharged. If you do not list be able to keep the property. The judge can something dishonest in your bankruptcy g records, or lying. Individual bankruptcy have been accurate, truthful, and complete.		
			If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.					
			Are you awa	_	ankruptcy is a serious	action with long-term financial and legal		
			☐ No ☑ Yes					
			Are you awa		y fraud is a serious crit could be fined or impr	ne and that if your bankruptcy forms are		
			☐ No	i incomplete, yet	oodia be med of mip	Solitor:		
			☑ Yes	or agree to nay s	comeone who is not an	attorney to help you fill out your bankruptcy forms?		
			☑ No			attorney to hop you in out your sammapley forms:		
			Yes. Nam Atta		ition Preparer's Notice, I	Declaration, and Signature (Official Form 119).		
			have read ar	nd understood thi	s notice, and I am awa	e risks involved in filing without an attorney. I re that filing a bankruptcy case without an if I do not properly handle the case.		
		(3	de	who Sh	ate f	*		
			Stignature of D	10/01/2019	<del></del>	Signature of Debtor 2  Date		
			Contact phone	MM / DD / YYYY		MM / DD / YYYY  Contact phone		
			Cell phone	757-816-9960		Cell phone		
			Email address	mskey1979@	yahoo.com	Email address		

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		-		
Fill in this in	iformation to ider	ntify your case:		
Debtor 1	Lakisha First Name	Shante Midde Name	Brown Last Name	
Debtor 2				
Spouse, if filing)		Middle Name the: Eastern District of Vi	Lest Neme	
Case number	Dankrupicy Court for	IIIe. Education States of Vi	· sana	☐ Check if this is
zase number	(If known)			amended filing
Official F	Form 106S	Sum		
	, , , , , , , , , , , , , , , , , , ,		iabilities and Certain Statistica	I Information 12/19
formation. I	Fill out all of your	schedules first; then c	ed people are filing together, both are equally responsomplete the information on this form. If you are filing a	
ur original	forms, you must	fill out a new Summary	and check the box at the top of this page.	
art 1: <b>S</b> t	ımmarize Your	Assets		
				Your assets
				Value of what you own
	VB. Property (Offic			\$
1a. Copy li	ne 55, lotal real e	state, from <i>Schedule A/B</i>		*
1b. Copy li	ne 62, Total person	nal property, from Schede	ule A/B	\$ <u>953.00</u>
1c Convili	ne 63. Total of all r	oranerty on <i>Schedule A/R</i>		050.00
io. Copy iii	ne oo, rotal or air p	property on concount 702		\$\$
art 2: St	ımmarize Your	Liabilities		
				Your liabilities
0-6-4-6-4	D. O. 454 1465- 4	tura Claima Sanumal hus	Promote (Official Form 400D)	Amount you owe
		•	Property (Official Form 106D) <i>laim,</i> at the bottom of the last page of Part 1 of <i>Schedule I</i>	D \$
Schedule E	E/F: Creditors Who	Have Unsecured Claims	(Official Form 106E/F)	
			d daims) from line 6e of <i>Schedule E/F</i>	\$(
3b. Copy th	ne total claims from	n Part 2 (nonpriority unse	cured claims) from line 6j of Schedule E/F	
			Your total lie	abilities \$ 24,887.32
ort 3: Su	mmarize Your	Income and Expense	28	
Schedule I	: Your Income (Off	ficial Form 106I)		
			Schedule I	\$1,368.55
0-4-4-1-	l: Vour Evoenses (	Official Form 106J)		

Copy your monthly expenses from line 22c of Schedule J

1,811.94

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Debi	tor 1	Lakisha		Shante	Brown	Case number (#known)	
		First Name	Middle Name	Last Name			
Pai	rt 4:	Answer Th	ese Questi	ons for Adminis	trative and Statistic	cal Records	· · · · · · · · · · · · · · · · · · ·
6	Are you	u filing for ba	nkruptcy un	der Chapters 7, 11	l, or 13?		
	☐ No. ☑ Yes		hing to repor	t on this part of the	form. Check this box and	d submit this form to the court with your oth	er schedules.
7. <b>\</b>	What ki	ind of debt do	you have?				
ļ	You fam	u <b>r debts are p</b> iily, or househo	rimarily cor old purpose."	sumer debts. Con 11 U.S.C. § 101(8)	sumer debts are those "i . Fill out lines 8-9g for st	ncurred by an individual primarity for a per atistical purposes, 28 U.S.C. § 159.	sonal,
				consumer debts. other schedules.	You have nothing to rep	ort on this part of the form. Check this box	and submit
					me: Copy your total cum form 122C-1 Line 14.	ent monthly income from Official	\$1,364.16
	~. 1	.gg8****		• • • •			· · · · · · · · · · · · · · · · · · ·
9. (	Copy th	ne following s	pecial cate(	pories of claims fro	om Part 4, line 6 of Sch	edule E/F:	
						Total claim	
	From	Part 4 on Sci	hedule E/F,	copy the following	:		
,	9a. Don	nestic support	obligations (	Copy line 6a.)		\$(	)
!	9b. Tax	es and certain	other debts	you owe the govern	nment. (Copy line 6b.)	\$	<u>)</u>

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Fill in this	s information to identify	your case and this	filing:			
Dahisad	Lakisha	Shante	Brown			
Debtor 1	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if fil	ing) First Name	Middle Name	t,ant Name			
United Stat	es Bankruptcy Court for the:	Eastem District of V	rginia			
Case numb	per				_	
	····				L	Check if this is an amended filing
Off.	-1 F 400 t #	_				amondod ming
	al Form 106A/I	<del></del>				
Sch	edule A/B:	<u>Propert</u>	<u>y                                    </u>			12/15
category responsi	where you think it fits bible for supplying correction in the supplying correction in the supplying correction in the supplying	nest. Be as comple et information. If mo er (if known). Answ	List an asset only once. If all te and accurate as possible. If ore space is needed, attach a ser every question. Land, or Other Real Estate	two married people separate sheet to th	e are filing together, bo is form. On the top of a	th are equally
			· ·		•	
	i <b>own or nave any legal</b> ( . Go to Part 2.	or edutable interes	t in any residence, building, k	ina, or similar propi	этсу ?	
	s. Where is the property?					
			What is the property? Check	all that apply.	Do not deduct secured cla	
1.1.			Single-family home  Duplex or multi-unit building	1	the amount of any secure Creditors Who Have Clair	
	Street address, if available, o	r other description	Condominium or cooperative		Current value of the	Current value of the
			■ Manufactured or mobile ho ■ Land	me	entire property?	portion you own?
			Land Investment property		\$	<b>\$</b>
	City	State ZIP Code	☐ Timeshare		Describe the nature of interest (such as fee	
			Other		the entireties, or a life	
			Who has an interest in the p	roperty? Check one.		
•	County		Debtor 1 only Debtor 2 only			
	County		Debtor 1 and Debtor 2 only		Check if this is co	mmunity property
			At least one of the debtors a		(========,	
			Other information you wish property identification num			
If you o	own or have more than on	e, list here:				
			What is the property? Check a  Single-family home	ill that apply.	Do not deduct secured cla the amount of any secure	
1.2.	Street address, if available, o		Duplex or multi-unit building		Creditors Who Have Clair	
,	Street address, if available, o	rother description	Condominium or cooperative		Current value of the	Current value of the
_			☐ Manufactured or mobile hom ☐ Land	e	entire property?	portion you own?
			Investment property		\$	\$
i	City	State ZIP Code	Timeshare		Describe the nature of interest (such as fee	
	•		U Other		the entireties, or a life	
			Who has an interest in the pr	operty? Check one.		
' <del>-</del>	O		Debtor 1 only Debtor 2 only			
•	County		Debtor 1 and Debtor 2 only		Check if this is co	mmunity property
			At least one of the debtors ar	d another	(see instructions)	
			Other information you wish to property identification numb		m, such as local	
			property recitationation number		· · · · · · · · · · · · · · · · · · ·	

			Danis 10 of 70		
ebtor		Shante	Document Page 12 of 72	(nown)	
	First Name Middle	e Name Last Nam	•		
			What is the property? Check all that apply.	Do not deduct secured cla	nime as assessations. Dut
1.3			☐ Single-family home	the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
	Street address, if available	e, or other description	Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	•
	<del> </del>		Land	\$	\$
			☐ Investment property		
	City	State ZIP Code	Timeshare Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
			Who has an interest in the property? Check one.		
			Debtor 1 only		
	County		Debtor 2 only		
			☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	Check if this is co (see instructions)	mmunity property
			Other information you wish to add about this its property identification number:	em, such as local	
				_	
			all of your entries from Part 1, including any entries	• •	\$
you	own, lease, or have leg	al or equitable inter	est in any vehicles, whether they are registered or	•	
you ow Car	n own, lease, or have leg in that someone else drive s, vans, trucks, tractors	gal or equitable interes. If you lease a vehic	de, also report it on Schedule G: Executory Contracts	•	<u> </u>
you ow Car	n own, lease, or have leg in that someone else drive s, vans, trucks, tractors No Yes	gal or equitable interes. If you lease a vehicles, sport utility vehicle	cle, also report it on Schedule G: Executory Contracts are, motorcycles	and Unexpired Leases.	
you ow Car	n own, lease, or have leg in that someone else drive s, vans, trucks, tractors No Yes Make:	gal or equitable interes. If you lease a vehicles, sport utility vehicle	cle, also report it on Schedule G: Executory Contracts in the property? Check one.	and Unexpired Leases.  Do not deduct secured clatte amount of any secure	aims or exemptions. Put d claims on Schedule D:
you ow Car	n own, lease, or have leg in that someone else drive s, vans, trucks, tractors No Yes Make: Model:	pal or equitable intendes. If you lease a vehicles, sport utility vehicles  Nissian  Sentra	who has an interest in the property? Check one.	and Unexpired Leases.  Do not deduct secured ck	aims or exemptions. Put d claims on Schedule D:
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you ow Car	n own, lease, or have leg in that someone else drive s, vans, trucks, tractors No Yes Make: Model: Year:	pal or equitable interes. If you lease a vehicle, sport utility vehicle  Nissian  Sentra  2007	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another	and Unexpired Leases.  Do not deduct secured class the amount of any secure Creditors Who Have Clair  Current value of the	aims or exemptions. Put d claims on Schedule D ns Secured by Property. Current value of ti portion you own?
you ow Car	n own, lease, or have leg in that someone else drive s, vans, trucks, tractors No Yes Make: Model: Year: Approximate mileage:	pal or equitable interes. If you lease a vehicle, sport utility vehicle  Nissian  Sentra  2007	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of ti portion you own?
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you ow Car Q	n own, lease, or have legan that someone else drivens, vans, trucks, tractors No Yes  Make:  Model:  Year:  Approximate mileage: Other information:	Nissian Sentra 2007 107,000	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	Do not deduct secured classes.  Do not deduct secured classes the amount of any secure Creditors Who Have Class Current value of the entire property?  \$2,556.00	aims or exemptions. Put d claims on <i>Schedule D</i> ns <i>Secured by Property</i> . <b>Current value of ti</b> <b>portion you own?</b>
you ow Car Q	n that someone else drivens, vans, trucks, tractors No Yes  Make: Model: Year: Approximate mileage: Other information:	Nissian Sentra 2007 107,000	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$ 2,556.00  Do not deduct secured clathe amount of any secure	aims or exemptions. Put d claims on Schedule Di ns Secured by Property.  Current value of ti portion you own?  \$
you ow Car Q	n own, lease, or have legan that someone else drivens, vans, trucks, tractors No Yes  Make:  Model:  Year:  Approximate mileage: Other information:	Nissian Sentra 2007 107,000	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.	Do not deduct secured classes.  Do not deduct secured classes the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$ 2,556.00  Do not deduct secured classes.	aims or exemptions. Put d claims on Schedule Di ns Secured by Property.  Current value of ti portion you own?  \$
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you ow Car Q	n that someone else drivens, vans, trucks, tractors No Yes  Make: Model: Year: Approximate mileage: Other information:  u own or have more than Make: Model:	Nissian Sentra 2007 107,000	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$ 2,556.00  Do not deduct secured clathe amount of any secure Creditors Who Have Clair	aims or exemptions. Put d claims on Schedule D. ns Secured by Property.  Current value of ti portion you own?  \$
Car	n that someone else drivens, vans, trucks, tractors No Yes  Make: Model: Year: Approximate mileage: Other information:  u own or have more than Make: Model: Year:	Nissian Sentra 2007 107,000	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$ 2,556.00  Do not deduct secured clathe amount of any secure Creditors Who Have Clair  Current value of the	aims or exemptions. Put d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$

Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put 3.3 the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year. Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☑ No ☐ Yes Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put 41 the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another ☐ Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages 0 you have attached for Part 2. Write that number here

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Lakisha

Debtor 1

Shante

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Debtor 1

Lakisha

Shante

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Part 3: **Describe Your Personal and Household Items** 

Do	you own or have any k	egal or equitable interest in any of the following items?	Current value portion you Do not deduct or exemptions	own? secured claims
6.	Household goods and	furnishings		
_	_	nces, furniture, linens, china, kitchenware		
	П No	(1)Queen Bedroom Set		250.00
			<b>a</b>	
7.	Electronics			
	Examples: Televisions a	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games		
	☐ No		<del></del> ,	
	Yes. Describe	(1) TV (1) Cell Phone	<b>\$</b>	400.00
8.	Collectibles of value			
	Examples: Antiques and stamp, coin,	f figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles		
	Yes. Describe			25.00
	WH 163. DOGG-10		\$	20.00
9.	Equipment for sports a		u-si	
		ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes		
	and kayaks;	carpentry tools; musical instruments		
	☑ No		7	
	Yes. Describe		\$	
10	Firearms			
		s, shotguns, ammunition, and related equipment		
	<b>☑</b> №			
	Yes. Describe		\$	
		<u> </u>	•	
11	Clothes	and the state of t		
	Examples: Everyday do	thes, furs, leather coats, designer wear, shoes, accessories		
	Yes. Describe	Everyday Clothes (Women)		200.00
	Tes. Describe	Women Shoes	\$	200.00
12.	. Jewelry			
	gold, silver	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
	No No			
	Yes. Describe		\$	
13.	. <b>Non-farm animals</b> <i>Examples:</i> Dogs, cats, b			
	☑ No			
	Yes. Describe			
	Tes. Describe	•• : :	\$	
14.	Any other personal and	d household items you did not already list, including any health aids you did not list		
	☑ No			
	Yes. Give specific	1		
	information	1	: <b>3</b>	<del></del>
15		fall of your entries from Part 3, including any entries for pages you have attached		052.00
		umber here	\$	953.00

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Debtor 1

Lakisha

Shante

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Part 4:	Describe Your Financial Assets	
Do you o	wn or have any legal or equitable interest in any of the following?	

Do you own or have any	legal or equitable interest in	any of the following?		Current value portion you of Do not deduct s or exemptions.	wn?
16. <b>Cash</b>					
Examples: Money you	have in your wallet, in your hor	ne, in a safe deposit box, and on hand when you t	ile your petition		
□ No					
<b>2</b> Yes			Cash:	\$	40.00
		unts; certificates of deposit; shares in credit unions nultiple accounts with the same institution, list eac		,	
□ No	-				
☑ Yes		Institution name:			
	17.1. Checking account:	Langley Federal Credit Union		\$	28.00
	17.2. Checking account:			\$	
	17.3. Savings account:	Langley Federal Credit Union		\$	5.00
	17.4. Savings account:	Navy Federal Credit Union		\$	5.00
	17.5. Certificates of deposit:			\$	
	17.6. Other financial account:			\$	
	17.7. Other financial account:			\$	
	17.8. Other financial account:				
	17.9. Other financial account:			\$	
	or publicly traded stocks				
	investment accounts with brok	erage firms, money market accounts			
<b>2</b> 1 No □ Yes	Institution or issuer name:				
				ę	
				. • <u> </u>	
				- \$ <u> </u>	
		orated and unincorporated businesses, includi	ng an interest in		
an LLC, partnership, ☑ No	_		% of ownership:		
Yes. Give specific	Name of entity:		% of ownership:	e	
information about	<u> </u>		0% %	\$	
VICIII			0% %	₽	<del> </del>

Debtor 1 Case number (# known) 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. **☑** No ☐ Yes. Give specific Issuer name: information about them..... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☑ No Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Mo No ☐ Yes..... Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: \_\_\_\_ Prepaid rent Telephone: Water: Rented furniture: Other 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) M No Yes ...... Issuer name and description:

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Lakisha

Shante

Document Page 17 of 72 Lakisha Shante Debtor 1 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ☐ Yes ..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☑ No Yes. Give specific information about them.... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☑ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ₩ No Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ₩ No ☐ Yes. Give specific information Federal: about them, including whether you already filed the returns State and the tax years. ..... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☑ No Yes. Give specific information...... : Alimony: Maintenance Support: Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ☑ No ☐ Yes. Give specific information.....

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ebtor 1	Lakisha First Name	Shante  Middle Name Last Name	Document	Page 19 of 72 Case number (a	(known)	· · · · · · · · · · · · · · · · · · ·
	r #st Name	Middle Name Last Name				
Machir	nerv. fixtures. e	quipment, supplies you use	in business, and to	ools of your trade		
□ No				-		
	s. Describe					 
		101 (4) (4) (4) (4) (4) (4) (4) (4) (4) (4)		,		<b>5</b>
nvento D No	ory					
	s. Describe	The body of a second theorem to a second the second to		224. MONEY ( ) PROVINCE CONTROL PORT OF THE THE TOTAL CONTROL OF THE	Va.	**
	J. DCJG100	N		-,		
mueres ⊐No		ips or joint ventures				
	s. Describe					
	o. Dobalbo				% of ownership:	
					%	\$
					%	\$
		<u> </u>	<u> </u>		%	\$
ustor	mer lists. mailin	g lists, or other compilation	S			
No		g now, or ourer complication	•			
Ye	s. Do your lists	include personally identifial	<b>ble information</b> (as	defined in 11 U.S.C. § 101(41A	\)) <b>?</b>	
	□ No					
	Yes. Desc	ribe				
		!				\$
nv hi	reinoce rolated	property you did not alread				
⊒ No		broberty you did not allead;	y nat			
Ye	s. Give specific					•
	ormation					\$
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				entries for pages you have at		s
r Pa	rt 5. Write that r	umber here			······••••••••••••••••••••••••••••••••	
		<b>ny Farm- and Commercia</b> r have an interest in farmland		d Property You Own or Ha	ive an interest i	<b>1.</b>
6:	H VOU OWD O	INCIAR ALL HINRIARE HI INCINCATE	u, nat it in Fart 1.			
6:	If you own or					
	•		t in any farm- or co	mmercial fishing-related pro	perty?	
o you	•		t in any farm- or co	ommercial fishing-related pro	perty?	
o you	u own or have a		t in any farm- or co	mmercial fishing-related pro	perty?	
o you	u own or have a		t in any farm- or co	mmercial fishing-related pro	perty?	Current value of the
o you	u own or have a		it in any farm- or co	ommercial fishing-related pro	perty?	portion you own?
o you	u own or have a		it in any farm- or co	emmercial fishing-related pro	perty?	portion you own?  Do not deduct secured cla
<b>loyou</b> Maria Ma Maria Ma Maria Maria Maria Maria Maria Maria Maria Maria Maria Maria Ma Ma Maria Maria Maria Maria Maria Maria Maria Maria Maria Maria Ma Maria Maria Maria Maria Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma	u own or have a		it in any farm- or co	ommercial fishing-related pro	perty?	portion you own?
Poyou ZiNo ⊇Ye	u own or have a c. Go to Part 7. s. Go to line 47. animals		it in any farm- or co	ommercial fishing-related pro	perty?	portion you own?  Do not deduct secured cla
MadiNo □ Ye	u own or have a control of the contr	ny legal or equitable interes			perty?	portion you own?  Do not deduct secured cla
io you i No i Ye	u own or have a control of the contr	ny legal or equitable interes			perty?	portion you own?  Do not deduct secured cla
io you i No i Ye	u own or have a b. Go to Part 7. s. Go to line 47. animals bles: Livestock, p	ny legal or equitable interes			perty?	portion you own?  Do not deduct secured da

	Case 19-7	3637-SCS					10/01/19 10:37	':19	Desc Ma	ain
Debtor 1	Lakisha First Name	Sha Middle Name	ante Last Name	Document	Page	20 of 7	72 e number (if known)			
	rast regino	MECCAC PAGING	Last Ivanie							
•	either growing	g or harvested								
□ No		···								
	s. Give specific ormation							:	\$	
19. <b>Farm a</b>				ry, fixtures, and t			A DIV PRINCE	, , , , , , , , , , , , , , , , , , , ,		
□ No		-1				***** - ******************************				
<b>—</b> 16	<b>5</b>								: <b>S</b>	
50 Farm a	: and fishing sum	olies, chemicals,				***************************************			` <del></del>	
□ No										
☐ Ye	s					·			•	
	Į	va wot	and hadronical and the Section of the Confession of			····			\$	
		rcial fishing-relat	ted property	you did not alres	ady list					
□ No □ Ye	s. Give specific								i  -	
	ormation								\$	
				t 6, including any					\$	0
for Pa	rt 6. Write that r	number here						→		
	_									
Part 7:	Describe /	All Property Y	ou Own o	r Have an Int	erest in	That Yo	u Did Not List Ab	ove		
		operty of any kind country club membe		t aiready list?						
☑ No	į					* ·			•	
	s. Give specific							-	\$ \$	<del></del>
	!							1	\$	
	į									
54. <b>Add th</b>	e dollar value o	f all of your entri	es from Pari	7. Write that nun	nber here .			→	\$	0
Part 8:	List the To	otals of Each	Part of th	nis Form						
55. <b>Part 1:</b>	: Total real estat	e, line 2						→	<b>\$</b>	0
56. <b>Part 2:</b>	Total vehicles.	line 5		s						
		and household it	tama lina de	· · ·	8	75.00				
			tems, iine 17	)		78.00				
58. <b>Part 4:</b>	Total financial	assets, line 36		\$_						
59. <b>Part 5:</b>	Total business	-related property	, line 45	\$_		0				
80. <b>Part 6:</b>	Total farm- and	i fishing-related p	property, line	e 52 \$_		0				
61. <b>Part 7:</b>	Total other pro	perty not listed,	line 54	+s		0				
	•			* <b>4.</b> i	0	153.00		_		052.00
62. <b>Total</b> p	ersonal proper	ty. Add lines 56 th	rough 61	<b>\$_</b>		Co	opy personal property to	otal 👈	+\$	953.00
									Γ	050.00
63. Total o	of all property o	n Schedule A/B.	Add line 55 +	line 62					\$	953.00
									L.—	

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Fill in this i	nformat	ion to identify you	ar case:					
Debtor 1	Lakisl	na	Shante	Brown				
Debtor 2	First Nam	e	Middle Name	Last Name				
(Spouse, if filing	) First Nam		Middle Name	Last Name	<del></del> -			
United States	Bankrup	tcy Court for the:Eas	tem District of	Virginia				
Case number (If known)	·				·			eck if this is an ended filing
Official	Form	106C						
Sche	dule	C: The	Prope	erty You	Claim a	s Exemp	t	04/19
Using the pro space is need	perty yo led, fill o	u listed on <i>Schedu</i>	le A/B: Propert	y (Official Form 106A	√B) as your sourc	e, list the property tha	supplying correct inform t you claim as exempt. It o of any additional pages	f more
specific dolla of any applic retirement fu limits the ex- would be lim	ar amou able sta inds—m emption ited to t	nt as exempt. Alto stutory limit. Some ay be unlimited in	ernatively, you e exemptions n dollar amou ollar amount a tutory amount	u may claim the full —such as those for nt. However, if you nd the value of the t.	fair market value health aids, righ claim an exempti	e of the property being ts to receive certain ion of 100% of fair m	one way of doing so is ng exempted up to the benefits, and tax-exen arket value under a law it amount, your exempt	amount npt w that
☐ You	are clair	ning federal exemp	tions. 11 U.S.	ptcy exemptions. 11 C. § 522(b)(2) you claim as exem				
		n of the property a nat lists this proper		urrent value of the ortion you own	Amount of the	exemption you claim	Specific laws that all	low exemption
				opy the value from chedule A/B	Check only one I	box for each exemption		
Brief descript	ion:		\$	<b>3</b>	<b>□</b> \$			
Line from Schedul	m	<del></del>				market value, up to ble statutory limit		
Brief descripti	ion:		\$	<u> </u>	<b>\$</b>	market value, up to		
Line fror Schedui						ble statutory limit		
Brief descript	ion:				<b>□</b> \$			
Line from Schedui						market value, up to ble statutory limit	<u> </u>	<del> </del>
-		_	-	ore than \$170,350?				
- •	to adjus	tment on 4/01/22 a	and every 3 yea	ars after that for case	s filed on or after	the date of adjustmen	t.)	
☑ No ☐ Yes.	Did vou	acquire the proper	rty covered by	the exemption within	1,215 days before	e you filed this case?		
<u> </u>	No No	Tagend and broken	,		,,,,,,,,,,,,,,,,,,,,,,,	,		
	Yes							

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Document

Debtor 1

Lakisha

Shante

**Brown** 

Case number (# known)\_

Part 2:

## **Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	\$	\$ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description:	\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description:	\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description:	\$	\$ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description:	\$	\$ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description:	\$	\$ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description:	\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description: Line from	\$	\$100% of fair market value, up to	
Schedule A/B:		any applicable statutory limit	
Brief description: Line from	\$	\$ 100% of fair market value, up to	
Schedule A/B:		any applicable statutory limit	
Brief description: Line from	\$	\$ 100% of fair market value, up to	
Schedule A/B:		any applicable statutory limit	
description:	\$	\$ 100% of fair market value, up to	
Schedule A/B:		any applicable statutory limit	
Brief description: Line from	\$	\$ 100% of fair market value, up to	
Schedule A/B:		any applicable statutory limit	

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Deteitor 1 Lakisha Shante Brown Traitmen Useta turne Column Colum		Fill in this in	formation to identify ye	our case:	_					
Column A							· · · · · · · · · · · · · · · · · · ·			
Colore 2   Colore 2   Colore 2   Colore 2   Colore 3   Colore 4   Colore 4   Colore 5		Debtor 1								
Content   Cont	ĺ	Dahler 2	PISI Name	Middle Name		LSSI MRM&				
Check if this is an amended filling			First Name	Middle Name		Last Name	<del></del>			
Check if this is an amended filling	l	Heitad States 1	Banknintov Court for the Fs	astem District	of Viminia					
Official Form 106D  Schedule D: Creditors Who Have Claims Secured by Property  12/15  Be as complete and accurate as possible. If two married people are fifing together, both are equally responsible for supplying correct information. If more space is medical, copy the Additional Page, fill it out, number the entiries, and ettach it to this form. On the top of any guidificent page, write your runner and case number of the state of the space of		Officer States (	Jamaupicy Court for the Co		. J. T. gillia					
Official Form 106D  Schedule D: Creditors Who Have Claims Secured by Property  1215  Be as complete and accurate as possible, if two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, if ill tout, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  1. Do any creditors have claims secured by your property?  2. In Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  2. List all secured claims.  2. List all secured claims. If a creditor has more than one secured daim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately one decision. If the claim is spheletical order according to the creditor's name.  2.1 Describe the property that secures the claim:  3. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$					····		<b> </b>		☐ Check i	f this is an
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As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt  Date debt was incurred  As of the date you file, the claim is: Check all that apply.  Indiquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number	_		me		we pr		DIE GERRIE	3	·	<b>-</b>
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City State ZIP Code Disputed  Who owes the debt? Check one. Nature of lien. Check all that apply.  Debtor 1 only An agreement you made (such as mortgage or secured car loan) Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Uniquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)  Date debt was incurred Last 4 digits of account number		Number	Street					!		
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Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt  Date debt was incurred  Last 4 digits of account number			-	_						
Debtor 1 and Debtor 2 only At least one of the debtors and another Uheck if this claim relates to a community debt  Date debt was incurred Last 4 digits of account number				Ц	_	t you made (such a	s mortgage or secured			
At least one of the debtors and another  Check if this claim relates to a community debt  Date debt was incurred  Last 4 digits of account number			•		•	(such as tax lien, m	nechanic's lien)			
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community debt  Date debt was incurred Last 4 digits of account number				_	Other (includi	ng a right to offset)		-		
Date debt was incurred Last 4 digits of account number										
			•	Las	t 4 digits of	account number				
	47 <b>5</b> 486#	CANADAS AT AL MANAGEMENT AND ADDRESS	MAN TO SERVE AND RESIDENCE AS THE PROPERTY OF SPECIFIC PARTY AND ADDRESS OF SPECIFIC PARTY.	CONTRACTOR OF THE PARTY OF THE PARTY.	and the second second second	CLASS SECTION	at number here:	Andready Treat, and a service on deficient and materials decided of the service o	and the many countries and the many construction of a second system in the second second second second second	Engline (1994) (1994) (1994) (1994) (1994) (1994) (1994) (1994) (1994) (1994) (1994) (1994) (1994) (1994) (1994)

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**Brown** 

Shante

Lakisha

Debtor 1 Case number (#1 Column A Column B Column C **Additional Page** Amount of claim Value of collateral Unsecured Part 1: After listing any entries on this page, number them beginning with 2.3, followed that supports this portion Do not deduct the by 2.4, and so forth. claim value of collateral If any Describe the property that secures the claim: Creditor's Name Number As of the date you file, the claim is: Check all that apply. Contingent State ZIP Code ☐ Unliquidated City Disputed Who owes the debt? Check one. Nature of lien. Check all that apply Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) \_ ☐ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Number As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated City State ZIP Code ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) ☐ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent ZIP Code Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) ☐ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number here: if this is the last page of your form, add the dollar value totals from all pages. Write that number here:

Doc 1 Filed 10/01/19 Entered 10/01/19 10:37:19 Desc Main Case 19-73637-SCS Page 25 of 72 Document Lakisha Shante Brown Debtor 1 Case number (if known) First Name List Others to Be Notified for a Debt That You Aiready Listed Part 2: Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. On which line in Part 1 did you enter the creditor? \_\_\_ Name Last 4 digits of account number \_\_\_ \_\_ \_\_

				_
Number	Street			_
City		State	ZiP Code	<del>-</del>
]	•	•		On which line in Part 1 did you enter the creditor?
Name	<u> </u>	<u> </u>		Last 4 digits of account number
Number	Street	<del> </del>		_
City		State	ZIP Code	<del>-</del> -
1		•		On which line in Part 1 did you enter the creditor?
Name		<u></u>		Last 4 digits of account number
Number	Street			_
City		State	ZIP Code	<del>-</del> -
	***	•		On which line in Part 1 did you enter the creditor?
Name	<del></del>		· · · · · · · · · · · · · · · · · · ·	Last 4 digits of account number
Number	Street		<u>.</u>	-
City		State	ZIP Code	<del>-</del> -
				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			_
City		State	ZIP Code	- -
				On which line in Part 1 did you enter the creditor?
Name		, , , , , , , , , , , , , , , , , , , ,		Last 4 digits of account number
Number	Street			_
City		State	ZIP Code	<del>-</del>

Case 19-73637-SCS Doc 1 Filed 10/01/19 Entered 10/01/19 10:37:19 Desc Main Document Page 26 of 72 Fill in this information to identify your case Lakisha Shante Brown Debtor 1 First Name Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: Eastern District of Virginia ☐ Check if this is an Case number amended filing (If known) Official Form 106F/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim Priority Nonpriority** amount amount Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent ZIP Code ■ Unliquidated Who incurred the debt? Check one. □ Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government lacksquare Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? Other, Specify ☐ No ☐ Yes 2.2 Last 4 digits of account number \_\_\_ s s s Priority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ☐ Disputed Who incurred the debt? Check one. Debtor 1 only

☐ No☐ Yes

Debtor 2 only

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

At least one of the debtors and another

☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

Taxes and certain other debts you owe the government

Claims for death or personal injury while you were

Domestic support obligations

intoxicated

Other. Specify

Filed 10/01/19 Entered 10/01/19 10:37:19 Desc Main Case 19-73637-SCS Doc 1 Docur**Rento** Page 27 Offee Jumber (# known) Debtor 1 Part 1: Your PRIORITY Unsecured Claims — Continuation Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Total claim Priority Nonpriority amount amount Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent City 7IP Code ☐ Unliquidated ☐ Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Other. Specify\_ Is the claim subject to offset? ☐ No ☐ Yes Last 4 digits of account number \_\_\_ \_\_ \_\_ \_\_ Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. ☐ Contingent 7ID Code Unliquidated ☐ Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only ■ Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other. Specify Is the claim subject to offset? ☐ No ☐ Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent ZIP Code ☐ Unliquidated Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only ■ Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt

☐ No☐ Yes

Is the claim subject to offset?

Other. Specify

Deb	tor 1	Case 19-7 Lakisha		Doc 1		1/19 Entered 10/01/1 _ Page 28 <b>of<sub>a</sub>722<sub>umber (F</sub>)</b>		Desc I	Main ————		
Pa	rt 2:	List All of	Your NONPRIO	RITY Uns	ecured Claims						
<b>4</b> . i	List nonpinclu	No. You have not Yes all of your nong priority unsecured aded in Part 1. If it	thing to report in the priority unsecured to claim, list the cre	nis part. Sub d claims in editor separa ditor holds a	the alphabetical o	court with your other schedules.  Frider of the creditor who holds e For each claim listed, identify what the other creditors in Part 3.If you	at type of claim it is. I	Do not list	claims already		
			-					1	otal claim		
.1			ial Services Inc	<u> </u>		Last 4 digits of account number	9 3 0 1		4.996.20		
		opposity Creditor's Nam O. Box 26707				When was the debt incurred?	2014	₽			
	Sa	alt Lake City,		UT	84126-0707	As of the date you file, the claim	in Charle all that a sub-				
		ho incurred the d Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the	or 2 only debtors and another im is for a commu		ZIP Code	Contingent Unliquidated Disputed  Type of NONPRIORITY unsecu Student loans Obligations arising out of a separathat you did not report as priority Debts to pension or profit-sharing other. Specify Car Paymen	red claim: ration agreement or divo claims g plans, and other simila	orce			
1.2	Nor	ortfolio Recovery Associates/ Brylane Home onpriority Creditor's Name 20 Corporate Blvd				Last 4 digits of account number $\frac{3}{2017} \frac{9}{7} \frac{7}{4} \frac{4}{5} \frac{59}{17}$					
	No City Win Si D D D D D D D D D D D D D D D D D D	ho incurred the d Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the	or 2 only debtors and another im is for a commu		23502 ZIP Code	As of the date you file, the claim Contingent Unliquidated Disputed  Type of NONPRIORITY unsecut Student loans Obligations arising out of a separathat you did not report as priority Debts to pension or profit-sharing of Other. Specify Credit Card	red claim: ation agreement or divo	orce			
.3	Non 12 Num No City Wh	priority Creditor's Nan 20 Corporate Enter Street orfolk no incurred the di Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the	Blvd. ebt? Check one. or 2 only debtors and another im is for a commu	VA State	_ondon 23502 ZIP Code	Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim Contingent Unliquidated Disputed  Type of NONPRIORITY unsecut Student loans Obligations arising out of a separathat you did not report as priority Debts to pension or profit-sharing	is: Check all that apply red claim:	rce	587.00		
	<b>4</b>	Yes				Other. Specify <u>Credit Card</u>			THE SPECIAL PROPERTY SERVICES AND ADDRESS OF THE PERSON OF		

page of Lo

☑ No ☐ Yes

Who incurred the debt? Check one.

At least one of the debtors and another

☐ Check if this claim is for a community debt

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

Debtor 1 only

Debtor 2 only

□ Disputed

☐ Student loans

Type of NONPRIORITY unsecured claim:

you did not report as priority claims

Other Specify Hospital Bill

Obligations arising out of a separation agreement or divorce that

Debts to pension or profit-sharing plans, and other similar debts

Debto	Case 19-73637-SCS Lakisha	Doc Shante	Docur <b>Rem</b> r		/lain 
Par	t 2: Your NONPRIORITY Uns			tion Page	
Afte	or listing any entries on this page,	number the	om beginning with 4.	4, followed by 4.5, and so forth.	Total claim
4.7	Sentra Healthcare			Last 4 digits of account number 8 2 5 7	\$_2,408.00
	P.O. Box 791168			When was the debt incurred? 2017	
	Number Street Baltimore	MD	21279-1168	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	☑ Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
	Debtor 1 only				
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
	At least one of the debtors and anoth			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	☐ Check if this claim is for a comm	nunity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other Specify Hospital Bill	
	<b>☑</b> No				
	Yes				
4.8	KABLUST HARREST GETT VALLEN EINE GETTE STENNE VERSTEN VON HER VERSTEN VERSTEN AN VERSTEN HER VERSTEN VERSTEN AU	greens derive bestelle vierein	መቀቀመውን ቀ ኮተኮ ፌዴአን «መድን ነ ነው የፈምስት የነው የተሞል መገኘ» - የተመት አ	an pagamakan na taon taon taon taon taon taon na taon	etti Siini Liitie – n belli ja janoon Har Sii vate sheessa
	WebBank/ Fingerhut			Last 4 digits of account number 6 4 5 7	<u>\$ 567.00</u>
	Nonpriority Creditor's Name			When was the debt incurred? 2017	
	P.O. Box 1269 Number Street				
	Greenville	sc	29602	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	☑ Contingent	
	Who incurred the debt? Check one.			Unfiquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
	At least one of the debtors and anoth	er		Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a comm	nunity debt		you did not report as priority claims	
	Is the claim subject to offset?	·		Debts to pension or profit-sharing plans, and other similar debts  Other, Specify Credit Card	
	<b>☑</b> No			a outer, opening	
	Yes				
4.9	odalek i vojskosti e venskosti e verik e <sub>list</sub> era 1994. goda ve krypala etnoch sid i kolistieren eta etnoch venskostie	HADONIC MONTH OF AN ADMINISTRAL OF AN ADMINISTRAL OF	A LANGUAGE AND A COMMENTAL PROPERTY OF THE PARTY OF THE P		s 695.00
	Portfolio Recovery Associate	s/ Capita	l One Bank	Last 4 digits of account number 6 5 6 4	Ψ
	Nonpriority Creditor's Name 120 Corporate Blvd.			When was the debt incurred? 2017	
	Number Street			As of the date you file, the claim is: Check all that apply.	
	Norfolk City	VA State	23502 ZIP Code	_	
	OIII)	ાકાઉ	ZIF UCE	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.			☐ Disputed	
	Debtor 1 only				
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only  At least one of the debtors and anoth	•••		Student loans	
	_			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	☐ Check if this claim is for a comm	nunity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other Specify Credit Card	
	Mo No				
	Yes				

Debt		Shante	Docun <b>Regy</b>	01/19 Entered 10/01/19 10:37:19 Desc N n Page 31 ota-20 number (# known)	1ain
Par	First Name Middle NAMe t 23 Your NONPRIORITY U	Last Nan Jnsecured C		uation Page	
Afte	or listing any entries on this pag	je, number the	em beginning with	n 4.4, followed by 4.5, and so forth.	Total claim
4.10	BB&T Bank	<u></u>		Last 4 digits of account number 4 4 3 2	\$ 560.00
	Nonpriority Creditor's Name 200 West Second St.			When was the debt incurred? 2018	
	Number Street Winston-Salem	NC	27101	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check or	16		Unliquidated	
	Debtor 1 only	ro.		☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			Student loans	
	At least one of the debtors and a	nother		<ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that</li> </ul>	
	Check if this claim is for a co	mmunity debt		you did not report as priority claims	
		minimumity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other. Specify loan	
	<b>⊠</b> No □ Yes				
4.1·	non manus primanes in a les ser insertina a rom a gambanes seus someticos a gent i aborr	en homogra i administrativa administrativa en en en entre unitario en	(a) individual dali didi individi digina casasan dipinaga in e	Last 4 digits of account number 3 6 5 9	s 507.
	Progressive Leasing Nonpriority Creditor's Name			Last 4 digits of account number	\$
	256 Data Dr. Number Street			When was the debt incurred? 2018	
	Draper	UT	84020	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
				Unliquidated	
	Who incurred the debt? Check on	<b>1e</b> .		☐ Disputed	
	Debtor 1 only				
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only  At least one of the debtors and at	nother		Student loans	
	At least one of the debtors and all	nouter		Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a co	mmunity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other, Specify Credit Card	
	₩ No				
	Yes				
4.12	Credit Control Corporation	TO TOTAL COMPANY AND THE TOTAL COMPANY AND	n in Albertan i League gapt des antières contratacturaites des misjonatures.	Last 4 digits of account number 6 5 6 4	s 429.00
	Nonpriority Creditor's Name	· · · · · · · · · · · · · · · · · · ·			
	P.O. Box 120568			When was the debt incurred? 2017	
	Number Street	VA	23612	As of the date you file, the claim is: Check all that apply.	
	Newport News	State	ZIP Code	☑ Contingent	
	-			Unliquidated	
	Who incurred the debt? Check on	ie.		☐ Disputed	
	Debtor 1 only				
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
	At least one of the debtors and ar	nother		Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a co	mmunity debt		you did not report as priority claims  Debts to pension or profit sharing plane, and other similar debts.	
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Hospital Bill	
	☑ No			_ Onor opening - respective -	
	☐ Yes				

Case 19-73637-SCS Lakisha S	Doc 1		./19 Entered 10/01/19 10:37:19 Desc M Page 32 Odase2umber (#known)	1ain 
art 2: Your NONPRIORITY Unse	cured Cl	aims — Continuat	ion Page	
ter listing any entries on this page, no	umber ther	n beginning with 4.	4, followed by 4.5, and so forth.	Total claim
LTD Financial Services/ Ashle	ey Stewa	rts	Last 4 digits of account number 4 8 7 6	s562.1
3200 Wilcrest Rd. Suite 600			When was the debt incurred? 2017	
Number Street Houston	TX	77042-6000	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent Unliquidated	
Who incurred the debt? Check one.			☐ Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and another	r		Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a commu	mity debt		you did not report as priority claims	
Is the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Card	
☑ No □ Yes				
Radius Global Solutions LLC,	/ First Pre	emier Bank	Last 4 digits of account number 4 4 3 2	s <u>662.0</u>
Nonpriority Creditor's Name 256 Data Dr.			When was the debt incurred? 2017	
Number Street Draper	UT	84020	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	☑ Contingent	
			Untiquidated	
Who incurred the debt? Check one.			Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and another	r		Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a commu	inity debt		you did not report as priority claims	
is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card	
☑ No ☐ Yes				
Comenity Bank/ Roamans	John I vinternamen i verse rompse	матат с нада задатова участ в права в подат-та в том годурусу сучество с над	Last 4 digits of account number 6 5 6 4	s468.0
Nonpriority Creditor's Name P.O. Box 182789			When was the debt incurred? 2017	
Number Street Columbus	OH	43218	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	☑ Contingent	
Who incurred the debt? Check one.			Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and another	r		Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a commu	nity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other Specify Credit Card	
☑ No ☐ Yes				

or 1 Lakisha	S7-SCS Doc 3 Shante		/01/19 Entered 10/01/19 10:37:19 Desc № № Page 33 Ofese2umber (#known)	/lain
22: Your NONPRIO	RITY Unsecured C	laims — Contin	uation Page	
r listing any entries on t	his page, number the	m beginning wit	h 4.4, followed by 4.5, and so forth.	Total clain
Comenity Bank/ Wo	men Within		Last 4 digits of account number 4 4 3 2	s489.0
Nonpriority Creditor's Name P.O. Box 182789			When was the debt incurred? 2017	
Number Street Columbus	OH	43218	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt?	Charle one		Unliquidated	
Debtor 1 only	DIEGRUNE.		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 o	nly		☐ Student loans	
At least one of the debto	rs and another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is	for a community debt		you did not report as priority claims	
Is the claim subject to of	fset?		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify. Credit Card	
☑ No ☐ Yes				
Comenity Bank/ Bry	lane Home	anting ( And Sender) in the second contracts of the Sender	Last 4 digits of account number 4 4 3 2	s 591.
Nonpriority Creditor's Name			— When was the debt incurred? 2017	
P.O. Box 182789			When was the dept incurred?	
Number Street Columbus	ОН	43218	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code		
Who incurred the debt?	Charle and		Unliquidated	
Debtor 1 only	UTIEUR OIRE.		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 o			Student loans	
At least one of the debto	rs and another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is	for a community debt		you did not report as priority claims	
Is the claim subject to of	<u>-</u>		<ul> <li>■ Debts to pension or profit-sharing plans, and other similar debts</li> <li>■ Other Specify Credit Card</li> </ul>	
Mo No Yes	<del></del>		<b>—</b> Опо. Зрону <u>этээх дага</u>	
Comenity Bank/ Jes	sica London	erinda ku kalandaran erinda da ku ku ku ka ka ku	Last 4 digits of account number 4 4 3 2	\$ 587.0
Nonpriority Creditor's Name P.O. Box 182789			When was the debt incurred? 2017	
Number Street	OH.	A2210	As of the date you file, the claim is: Check all that apply.	
Columbus	OH State	43218 ZIP Code	Contingent	
•			Unliquidated	
Who incurred the debt?	Check one.		☐ Disputed	
Debtor 1 only			Time of MONIPPIOPITY and a second at a large	
Debtor 2 only Debtor 1 and Debtor 2 or	nk		Type of NONPRIORITY unsecured claim:	
Debior : and Debior 2 0	тиу		Student loans	

₩ No Yes

At least one of the debtors and another

is the claim subject to offset?

 $f \square$  Check if this claim is for a community debt

Obligations arising out of a separation agreement or divorce that you did not report as priority claims
Debts to pension or profit-sharing plans, and other similar debts
Other. Specify Credit Card

Debt	Lakieha SI	Doc 1		1/19 Entered 10/01/19 10:37:19 Desc N Page 34 Otase2umber (# known)	1ain	
Par	t 2: Your NONPRIORITY Unse	cured Cl	aims — Continua	tion Page		
Afte	or listing any entries on this page, n	umber ther	n beginning with 4	.4, followed by 4.5, and so forth.	Tol	tal claim
4.19	Comenity Bank/ Victoria Secre	ets		Last 4 digits of account number 4 4 3 2	\$	466.00
	Nonpriority Creditor's Name P.O. Box 182789			When was the debt incurred? 2017		
	Number Street Columbus	ОН	43218	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			Unliquidated Unliquidated		
	Debtor 1 only			_ bispace.		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			Student loans		
	_			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>		
	☐ Check if this claim is for a commu	inity debt		Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?			Other Specify Credit Card		
	☑ No ☐ Yes					
	u res					
4.20	омаліть расстава за вистема то есте апада я фева, «зарожнико «на лечейта́нава не реге се штемеляў саста.	APV HAZIMARIN GARAGORI	والمستوارية والمست	omatikaa maanalalan maalalan moo alalah moo sa moonista ah moonista ah moonista ka han too sa moonista ka moonista ka moonista ka maa maa ka moonista ka maa moonista ka maa maa ka maa maa moonista ka maa maa maa moonista ka maa maa moonista ka maa maa moonista ka maa moonista ka maa maa maa maa maa maa maa maa maa	}%> <b>3-/4</b> *#101***	well, suppose with surprise door
۲.2۱	Comenity Bank/ Full Beauty			Last 4 digits of account number 4 4 3 2	<b>\$</b>	620.00
	Nonpriority Creditor's Name	-		When was the debt incurred? 2017		
	P.O. Box 182789			When was the deck incurred?		
	Number Street Columbus	ОН	43218	As of the date you file, the claim is: Check all that apply.		
	Сйу	State	ZIP Code	Contingent		
				☐ Unfiquidated		
	Who incurred the debt? Check one.			☐ Disputed		
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only			Student loans		
	At least one of the debtors and another	ī		Obligations arising out of a separation agreement or divorce that		
	☐ Check if this claim is for a commu	inity debt		you did not report as priority claims		
	Is the claim subject to offset?	•		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Card		
	₩ No			Outer Specify Or out Control		
	Yes					
4 24	AND THE RESERVE ASSESSMENT AND THE RESERVE AND THE ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT ASSESSMENT AS THE ASSESSM	and all managements for case canada	an annuar anns ann ann an saithe 'S mar inn - adhar d'ar bear d'ibhliaine ar aidir.	I II . I V	f helostyra ar par sant	562.00
4.2	Comenity Bank/ NY & CO			Last 4 digits of account number 4 4 3 2	\$	302.00
	Nonpriority Creditor's Name P.O. Box 182789			When was the debt incurred? 2017		
	Number Street Columbus	ОН	43218	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	<b></b>			☐ Unliquidated		
	Who incurred the debt? Check one.			☐ Disputed		
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only			Student loans		
	At least one of the debtors and another	r		Student loans     Obligations arising out of a separation agreement or divorce that		
	Check if this claim is for a commu	ınity debt		you did not report as priority claims		
	Is the claim subject to offset?	•·		Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card		
	M No			Cuici. Opouly Titals Tally		
	☐ Yes					

Case 19-73637-S Lakisha First Name Middle Name	Shante	Docur <b>Ren</b>	/01/19 Entered 10/01/19 10:37:19 Desc N Ntn Page 35 Offase2umber (#known)	/lain
Part 2: Your NONPRIORITY	Unsecured C	Claims — Contin	uation Page	
fter listing any entries on this p	age, number th	em beginning wit	th 4.4, followed by 4.5, and so forth.	Total claim
Credit Control Corporation	on	· · · · · · · · · · · · · · · · · · ·	Last 4 digits of account number 4 4 3 2	\$ <u>717.0</u>
11821 Rock Landing Dr.			When was the debt incurred? 20178	
Number Street Newport News	VA	23606	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent ☐ Unliquidated	
Who incurred the debt? Check	one.		Disputed	
Debtor 1 only				
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and	another		Student loans	
Charle if this slaim is far a			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
LI Check if this claim is for a distribution is claim subject to offset?	commanny debt		Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Hospital Bill	
<b>⊠</b> No □ Yes				
To belong the second and second analysis of the second and second	प कुर अञ्चान के किया निर्माणी कार्यक्ष क्यों के कार्य अपनाम अवस्थितकार	والمعتبين ومرود ويراه والمعتبرة والمعتبرة والمعتبرة والمعتبرة والمعتبرة والمعتبرة والمعتبرة والمعتبرة والمعتبرة	Last 4 digits of account number 4 4 3 2	s 280.0
Credit Control Corporation Nonpriority Creditor's Name	on		<del>-</del>	\$ 200.0
11821 Rock Landing Dr.			When was the debt incurred? 2018	
Number Street Newport News	VA	23606	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check	one.		☐ Unliquidated ☐ Disputed	
Debtor 1 only			Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and	another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a	community debt		you did not report as priority claims	
Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Hospital Bill	
Mo ☐ Yes				
Comenity Bank/ NY & CO	engagagagabilita ar Mahibrahilan or dera yennak et arte son - v	rronnia generapy, systemy, grupsar ne a bisinga spacego	Last 4 digits of account number 4 4 3 2	\$562.0
Nonpriority Creditor's Name	<u></u>			
P.O. Box 182789			When was the debt incurred? 2017	
Number Street Columbus	ОН	43218	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check	one.		Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and	another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a	community debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?  ☑ No			Other. Specify Credit Card	
Yes				

otor 1 Lakisha	Shante		/01/19	1aın	
First Name Middle Name  IT 2: Your NONPRIORITY Un	Last Nat Secured C	ne Haims — Contine	uation Page		
ter listing any entries on this page,	number the	em beginning with	h 4.4, followed by 4.5, and so forth.	Tot	al claim
Resurgent/ LVNV Funding			Last 4 digits of account number 4 4 3 2	\$	567.00
Nonpriority Creditor's Name P.O. Box 1269			When was the debt incurred? 2018		
Number Street Greenville	sc	29602	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Check one.			Unitiquidated		
Debtor 1 only			☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and anot	her		Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a comp	munity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset?			Other Specify Bill		
MÍNo □ Yes					
Colony Bank/ Midnight Velve	et	arringsomman, and 14 m of \$4000 a thinks are stored	Last 4 digits of account number 4 4 3 2	\$	70.0
Nonpriority Creditor's Name		<u></u>	— When was the debt incurred? 2017		
1112 7th Ave		····-	Assign was the dank mediter:		
Monroe	WI	53566	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Check one.			Unliquidated Disputed		
Debtor 1 only			□ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			☐ Student loans		
At least one of the debtors and anot			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>		
Check if this claim is for a com	munity debt		Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset?			Other Specify Credit Card		
Maria No □ Yes					
	managerapan (Senioran) series (Senioran)	germanian indi antiquippi pelitika harrita pipul distributi di distributi distributi distributi distributi distributi distributi distributi di	Last 4 digits of account number 4 4 3 2	\$	636.0
Web Bank/ Fingerhut Nonpriority Creditor's Name					
6250 Ridgewood Rd			When was the debt incurred? 2014		
Number Street Saint Cloud	MN	56303	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Check one.			Unliquidated		
Debtor 1 only			☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			☐ Student loans		
At least one of the debtors and another	ther		Obligations arising out of a separation agreement or divorce that		
☐ Check if this claim is for a com	munity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset?			Other. Specify Credit Card		
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After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.  Total claim  TBOM/ CONTFIN  Nerporny Creator's Name  4550 New Linden Hill Rd. #400  Name Street  Who incurred the debt? Check one.    Debtor 1 only   Debtor 2 only   Debtor 3 only   Debtor 3 only   Debtor 4 only   Debtor 5 only   Debtor 6 only			ms — Continuatio	n Page		
TBOM CONTFIN		<u>.</u>			Tot	ai claim
As of the date you file, the claim is: Check all that apply.	— TBOM/ CONTFIN			Last 4 digits of account number 4 4 3 2	<b>\$</b>	636.00
Number   Sheet   Wilmington   DE   19808   Suite   2F Gode   Contingent   Uniquidated   Uniquidate	• •	ili Rd #400	_	When was the debt incurred? 2014		
Contingent   Uniquidated   U	Number Street			As of the date you file the claim is: Check all that anny		
Who incurred the debt? Check one.    Debtor 1 only			19000	<b>=</b>		
Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 3 only   Debtor 3 only   Debtor 4 in all Debtor 2 only   Debtor 4 in all Debtor 2 only   Debtor 4 in all Debtor 2 only   Debtor 5 in all Debtor 2 only   Debtor 4 in all Debtor 2 only   Debtor 5 in all Debtor 2 only   Debtor 6 in all Debtor 2 only   Debtor 1 only   Debtor 1 in all Debtor 2 in all Debtor 3 in	ony	State	ZIF Code	_		
Debtor 1 and Debtor 2 only Debtor 3 Sizes  Who Incurred the debt? Check one. Debtor 3 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 5 Sizes  Who Incurred the debt? Check one. Debtor 5 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 9 only Deb	Who incurred the debt?	Check one.		•		
Debtor 1 and Debtor 2 only   Student loans   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Debts to pension or profit-sharing plans, and other similar debts   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Bill   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Bill   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Bill   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Bill   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Bill   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Bill   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Debts to pension or profit-sharing plans, and other similar de	•			Two of MONDRIONITY		
At least one of the debtors and another   Check if this claim is for a community debt is the claim subject to offset?   Sinke   Check if this claim is for a community debt is the claim subject to offset?   Sinke   Check one.   Check if this claim is for a community debt   Sinker   Check if this claim is for a community debt   Sinker   Check one.   Check if this claim is for a community debt   Sinker   Check one.   Check if this claim is for a community debt   Sinker   Check one.   Check if this claim is for a community debt   Sinker   Check one.   Check if this claim is for a community debt   Sinker   Check one.   Check if this claim is for a community debt   Sinker   Check one.   Check if this claim is for a community debt   Sinker   Check if this claim is for a community debt   Sinker   Check if this claim is for a community debt   Sinker   Check one.   Check if this claim is for a community debt   Sinker   Check if this claim is for a community debt   Sinker   Check if this claim is for a community debt   Sinker   Check if this claim is for a community debt   Sinker   Check if this claim is for a community debt   Sinker   Check if this claim is for a community debt   Sinker   Check if this claim is for a community debt   Sinker   Check if this claim is for a community debt   Sinker   Check if this claim is for a community debt   Sinker   Check if this claim is check all that apply.   Check or check   Check		ntv		<u>-</u>		
Check if this claim is for a community debt let the claim subject to offset?   Debts to pension or profit-sharing plans, and other similar debts	_	•				
Second Process   Seco	☐ Check if this claim is	for a community debt		you did not report as priority claims		
Web Bank/ Fingerhut   Last 4 digits of account number 4 4 3 2 \$ \$ 567.0		•		Debts to pension or profit-sharing plans, and other similar debts		
Yes		iber t		Other. Specify DIII		
Web Bank/ Fingerhut Norproroty Creditor's Name 6250 Ridgewood Rd.  Number Saint Cloud MN 56303 City State Debtor 1 only Debtor 1 and Debtor 2 only Yes  33  Receivables Management System Saint Cloud MN 56303 City State Debtor 1 only Debtor 2 only Yes  33  Receivables Management System Saint Cloud MN 56303 City State State 2 pr Code Who incurred the debt? Check one.    Debtor 1 only   Debtor 1 only   Debtor 2 only   At least one of the debtors and another   Check if this claim is for a community debt Is the claim subject to offset?   Morprority Creditor's Name   At least one of the debtors and another   Check if this claim is for a community debt   State 2 pr Code   At least one of the debtors and another   Debtor 2 only   Debtor 1 only   Pes   Saint Cloud   MN 56303   City   State   State 2 pr Code   When was the debt incurred?   Check if this claim is for a community debt   Contingent   Uniquidated   Debtor 1 only   Debtor 1 only   Debtor 1 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtors and another   Uniquidated   Debtor 2 only   Debtor 1 only   Debtor 1 and Debtor 2 only   Debtor 1 only   Debtor 1 and Debtor 2 only   Debtor 1 only   Debtor 1 and Debtor 2 only   Type of NONPRIORITY unsecured claim:   Student loans   Debtor 1 only   Debtor 1 and Debtor 2 only   Type of Nonpriority Calims   Student loans   Debtor 1 only   Debtor 1 and Debtor 2 only   Type of Nonpriority Calims   Student loans   Debtor 1 only   Debtor 2 only   Type of Nonpriority Calims	_					
Web Bank/ Fingerhut Norproroty Creditor's Name 6250 Ridgewood Rd.  Number Saint Cloud MN 56303 City State Debtor 1 only Debtor 1 and Debtor 2 only Yes  33  Receivables Management System Saint Cloud MN 56303 City State Debtor 1 only Debtor 2 only Yes  33  Receivables Management System Saint Cloud MN 56303 City State State 2 pr Code Who incurred the debt? Check one.    Debtor 1 only   Debtor 1 only   Debtor 2 only   At least one of the debtors and another   Check if this claim is for a community debt Is the claim subject to offset?   Morprority Creditor's Name   At least one of the debtors and another   Check if this claim is for a community debt   State 2 pr Code   At least one of the debtors and another   Debtor 2 only   Debtor 1 only   Pes   Saint Cloud   MN 56303   City   State   State 2 pr Code   When was the debt incurred?   Check if this claim is for a community debt   Contingent   Uniquidated   Debtor 1 only   Debtor 1 only   Debtor 1 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtors and another   Uniquidated   Debtor 2 only   Debtor 1 only   Debtor 1 and Debtor 2 only   Debtor 1 only   Debtor 1 and Debtor 2 only   Debtor 1 only   Debtor 1 and Debtor 2 only   Type of NONPRIORITY unsecured claim:   Student loans   Debtor 1 only   Debtor 1 and Debtor 2 only   Type of Nonpriority Calims   Student loans   Debtor 1 only   Debtor 1 and Debtor 2 only   Type of Nonpriority Calims   Student loans   Debtor 1 only   Debtor 2 only   Type of Nonpriority Calims	and an experimental last construction of the c	oongaam heroniyaase horongaase garan ha sii, ah jih saaya kasaasii, wax	ennaturis en ema se llucare en en en entre en anomales en		* Anne Bullet (12 lie) and an	
When was the debt incurred?   2017	t e			Land A distribution of account assembles A A 3 2		E67 00
Second Contingent   State		<u></u>	<del></del>	Last 4 digits of account number 4 4 5 2	\$	367.00
Namber   Street   Saint Cloud   MN   56303   State   ZIP Code   Contingent   Unliquidated   Disputed   Unliquidated   Unliquidated   Unliquidated   Disputed   Unliquidated   Unliquidated   Unliquidated   Unliquidated   Unliquidated   Unliquidated   Unliquidated   Unliquidated   Unliquidated   Disputed	· · ·	1		When was the debt incurred? 2017		
State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt State ZIP Code  Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Debtor 3 esparation agreement or divorce that you did not report as priority claims Debtor 1 bettor 1 claim subject to offset?  Meceivables Management System Receivables Management System Nonpriority Creditor's Name 6250 Ridgewood Rd Number Sinet Saint Cloud MN 56303 City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Disputed  Contingent Unfliquidated Disputed  Contingent Unfliquidated Disputed  Contingent Unfliquidated Disputed  Type of NONPRIORITY unsecured claim: Contingent Unfliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Contingent Unfliquidated Disputed  Student loans  Contingent Unfliquidated Disputed  Student loans  Contingent Unfliquidated Disputed  Student loans Contingent Unfliquidated Disputed  Student loans Contingent Unfliquidated Disputed  Student loans Contingent Unfliquidated Disputed  Student loans Contingent Unfliquidated Disputed  Student loans Contingent Unfliquidated Disputed  Student loans Contingent Unfliquidated Disputed  Student loans Contingent Unfliquidated Disputed  Student loans Contingent Unfliquidated Disputed  Student loans Contingent Unfliquidated Disputed  Contingent Unfliquidated Disputed  Student loans Contingent Unfliquidated Disputed  Contingent Contingent Contingent Contingent Contingent Contingent Continge	Number Street		<del>.</del>	As of the date you file the claim is: Check all that each.		
Who incurred the debt? Check one.    Debtor 1 only   Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 3 priority debt   Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 only   Check if this claim is for a community debt   Debtor 2 only   Debtor 1 only   Debtor 3 only   Debtor 3 priority debts   Debtor 4 only   Debtor 3 priority debts   Debtor 4 only   Debtor 3 priority debts   Debtor 4 only   Debtor 2 only   Debtor 2 only   Debtor 3 priority debts   Debtor 4 only   Debtor 3 priority debts   Debtor 4 only   Debtor 4 only   Debtor 4 only   Debtor 5 priority debts   Debtor 6 priority debts   Debtor 7 priority debts   Debtor 6 priority debts			30303			
Who incurred the debt? Check one.    Debtor 1 only     Debtor 2 only     Debtor 1 and Debtor 2 only     At least one of the debtors and another     Check if this claim is for a community debt     Is the claim subject to offset?     An o	City	State	ZIP Code	•		
Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?  No Yes  Receivables Management System Norpriority Creditor's Name 6250 Ridgewood Rd Number Street Saint Cloud MN 56303 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Dobligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Signature Check if this claim is for a community debt  Type of NONPRIORITY unsecured claim:  Cohigations arising out of a separation agreement or divorce that you did not report as priority claims  Type of NONPRIORITY unsecured claim:  Disputed  Type of NONPRIORITY unsecured claim: Disputed  Check if this claim is for a community debt  Check if this claim is for a community debt	Who incurred the debt?	Check one.				
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes    At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes    At least one of the debtors and another   Other. Specify Credit Card    •			·			
At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  Mo Yes  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  Mo Yes  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  Mo Yes  At least one of the debtors and another  Check if this claim is for a community debt  Chec				Type of NONPRIORITY unsecured claim:		
□ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes  Last 4 digits of account number 0 7 7 4  When was the debt incurred?  When was the debt incurred?  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  City State ZIP Code  Who incurred the debt? Check one. □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt	_					
Debts to pension or profit-sharing plans, and other similar debts	<u>_</u>					
Seceivables Management System   Last 4 digits of account number   0   7   7   4   5   177.2		•		Debts to pension or profit-sharing plans, and other similar debts		
Receivables Management System Nonpriority Creditor's Name 6250 Ridgewood Rd Number Street Saint Cloud MN 56303 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  Last 4 digits of account number 0 7 7 4  When was the debt incurred?  2019  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims		fset?		Other. Specify Credit Card		
Receivables Management System  Nonpriority Creditor's Name 6250 Ridgewood Rd  Number Street Saint Cloud MN 56303  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt.						
Receivables Management System Nonpriority Creditor's Name 6250 Ridgewood Rd  Number Street Saint Cloud MN 56303 City State ZIP Code  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt	که دخد مصد به دارستان که درستان که درستان میشود کرد کردستان کر	CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR (A) AND	rhandrisk farestaar soon fran maa'n ver-ferfan as oor mee'n a'n be	a res contribution success success provide personal programmes and a service of contribution of contributions of contribution	N1/04 SP0304/SF-204 SP	and the second second second
As of the date you file, the claim is: Check all that apply.  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply.  Type of NONPRIORITY unsecured claim:  Student loans Disputed  Student loans Disputed  Check if this claim is for a community debt	Receivables Manage	ement System		Last 4 digits of account number 0 7 7 4	\$	177.23
Number Street Saint Cloud MN 56303  City State ZIP Code Contingent Unliquidated Unliquidated Unliquidated Unliquidated Unlocated Unlocat	· •			When was the debt incurred? 2019		
City State ZIP Code Contingent  Unliquidated  Unliquidated  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims	Number Street		E6202	As of the date you file, the claim is: Check all that apply.		
Who incurred the debt? Check one.  Unliquidated Disputed  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims			50303	_		
Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 only Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	•					
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt	_	Check one.		•		
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt				Type of MONPPIODITY upper and electric		
At least one of the debtors and another  Obligations arising out of a separation agreement or divorce that you did not report as priority claims		nly				
Check if this claim is for a community debt you did not report as priority claims		=				
Debts to pension or profit-sharing plans, and other similar debts	Check if this claim is	for a community debt		you did not report as priority claims		
		•		Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset?  Solution Specify Dr. Bill  No		ee, i		Other Specify D1. D111		
Q Yes	_					

Debte	Case 19-73637-SCS Lakisha First Name Middle Name	DOC Shante	Docun <b>Renyo</b> n	1/19 Entered 10/01/19 10:37:19 Desc N _ Page 38 Ofa-20umber (#known)	1ain	<u>.</u>
Par	t 2: Your NONPRIORITY Uns	secured (	Claims — Continua	tion Page		
Afte	or listing any entries on this page,	number th	em beginning with 4.	4, followed by 4.5, and so forth.	To	tal claim
4.3	Patient First Nonpriority Creditor's Name			Last 4 digits of account number 4 4 3 2	\$	177.23
	332 Newtown Rd			When was the debt incurred? 2019		
	Number Street Virginia Beach	VA	23462	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed		
	Debtor 1 only			Car Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only  At least one of the debtors and anoth	rer		Student loans		
	☐ Check if this claim is for a comm			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>		
	Is the claim subject to offset?	numy Gebi	•	Debts to pension or profit-sharing plans, and other similar debts other. Specify Doctor Bill		
	M No			and Owner. Specify Doctor Bill		
	Yes					
	ገ የርምን እያየያገግቢያ ትሃን ምሳያቆንባያይያን ትንስላቸን የፈርላቸው ትርሳያው ተላጅ ያው የአስተትና ብር ያላህ እነፈነታችን ያልት ይቀ ትቀም ትብለብ እኔ ትናንንን መስክ	e og de la company de la compa	MATTER BILL OF THE TO VIEW AND FROM MEMORIAL AND PROPERTY.		markan-kan kan k	rryatrogos yan hanga pali yan berjar y
4.32	PNC Bank			Last 4 digits of account number 4 4 3 2	\$	700.00
	Nonpriority Creditor's Name			When was the debt incurred 2 2018	`	
	222 Delaware Ave			When was the debt incurred?		
	Number Street Wilmington	DE	19899	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	☑ Contingent		
	Who incurred the debt? Check one.			Unliquidated Disputed		
	■ Debtor 1 only			Consputed Constitution of the Constitution of		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only			☐ Student loans		
	At least one of the debtors and anoth			Obligations arising out of a separation agreement or divorce that		
	☐ Check if this claim is for a comm	nunity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?			Other Specify Bank Fee		
	Mo No ☐ Yes					
	-contract amino-utana-poisson to endoted at the 5 at 2 date 12 date 12 date 5 dates 5 dates 12 dates 12 dates 14 dates 12 dates 1	ATT SERVICE STORE STORES	TTOKOM 1974 C POSTY ME SEKY KERPERMENTY V C LODIO METOTOKOM BERNY M		<b>7</b> 12773-F07188	
4.3	Navy Federal Credit Union			Last 4 digits of account number 0 7 7 4	\$	400.00
	Nonpriority Creditor's Name			When was the debt incurred? 2018		
	P.O. Box 3000 Number Street			When was the dept incurred r		
	Merrifield	VA	22119-3000	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent Unliquidated		
	Who incurred the debt? Check one.			Disputed		
	Debtor 1 only			·		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only  At least one of the debtors and anoth	er		Student loans		
	_			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Check if this claim is for a comm	iunity Gebt		Debts to pension or profit-sharing plans, and other similar debts		
	is the claim subject to offset?			☑ Other. Specify Bank Fee		
	Yes					

Debt Par	Case 19-73637-SCS Lakisha St First Name Middle Name  T 2: Your NONPRIORITY Unse	DOC 1 hante Last Name	Docum <b>Ren</b>	Page 39 Otase2 umber (# known)	1am ——	
Afte	or listing any entries on this page, nu	ımber the	m beginning with	h 4.4, followed by 4.5, and so forth.	To	tal claim
4.34	Bank of America			Last 4 digits of account number 4 4 3 2	\$	550.00
	Nonpriority Creditor's Name 100 North Tryon St.			When was the debt incurred? 2017		
	Number Street Charolette	NC	28255	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed		
	Debtor 1 only			C Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only			Student loans		
	At least one of the debtors and another	•		Obligations arising out of a separation agreement or divorce that		
	Check if this claim is for a commu	nity debt		you did not report as priority claims		
	Is the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Bank Fee		
	₩ No			Curo. Opcony		
	Yes					
4.3	Geico Insurance Nonpriority Creditor's Name	hang Ya Tillyari ( ang at yaya yaya magari Angir	i a santa kamada sahir. Makamada sahirika kamada asah sahirika dari	Last 4 digits of account number 4 4 3 2	\$	666.00
	5260 Western Avenue			When was the debt incurred? 2017		
	Number Street	MD	00045	As of the date you file, the claim is: Check all that apply.		
	Chevy Chase	MD State	20815 ZIP Code	_		
	City	State	ZIP Code	☐ Contingent☐ Unifiquidated		
	Who incurred the debt? Check one.			Disputed		
	☑ Debtor 1 only			- Mingerson		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only			☐ Student loans		
	At least one of the debtors and another	•		Obligations arising out of a separation agreement or divorce that		
	☐ Check if this claim is for a commu	nity debt		you did not report as priority claims		
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Bill		
	☑ No			Outer Specify Sin		
	Yes					
	的复数数据 (	<del>orochesta</del> nnecentran sec	craft die Custicarius Antifusionratis inn substanti utrus uns		\$	**************************************
	Nonpriority Creditor's Name	-		Last 4 digits of account number		
				When was the debt incurred?		
	Number Street			As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	Mile incomed the debte of			Unliquidated		
	Who incurred the debt? Check one.			☐ Disputed		
	Debtor 1 only			Time of NONDDIOPITY uncoursed claims		
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			Student loans		
				<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>		
	☐ Check if this claim is for a commu	nity debt		Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?			Other Specify		
	□ No					
	□ v					

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5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For

Debtor 1

Part 3:

List Others to Be Notified About a Debt That You Already Listed

example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check one): 🚨 Part 1: Creditors with Priority Unsecured Claims Number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number \_\_\_ \_\_\_ State ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Name Line \_\_\_\_\_ of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number \_\_\_ \_ ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Name Line \_\_\_\_\_ of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Part 2: Creditors with Nonpriority Unsecured Last 4 digits of account number \_\_\_ \_\_ \_\_ State ZIP Code City On which entry in Part 1 or Part 2 did you list the original creditor? Line \_\_\_\_\_ of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Street Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number \_\_\_ \_\_ \_\_ State City ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Name Line \_\_\_\_\_ of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number \_\_\_ \_\_ \_\_ State ZIP Code City On which entry in Part 1 or Part 2 did you list the original creditor? Name Line \_\_\_\_\_ of (Check one): Part 1: Creditors with Priority Unsecured Claims Number ☐ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number \_\_\_\_ \_ ZIP Code City State On which entry in Part 1 or Part 2 did you list the original creditor? Line \_ of (Check one): Part 1: Creditors with Priority Unsecured Claims Number ☐ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number State ZIP Code

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Lakisha Shante

Total claim

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. <b>-</b>	s	0
	6e. Total. Add lines 6a through 6d.	6e.	\$	0
			Total claim	
Total claims	6f. Student loans	<b>6</b> f.	\$	0
Total claims from Part 2	6f. Student loans  6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	\$ \$	0
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority	6g.	\$\$ \$\$	
	<ul> <li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>6h. Debts to pension or profit-sharing plans, and other</li> </ul>	6g.	\$\$ \$\$	0

Official Form 106E/F

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Fill	in this in	formation to ident	ify your case:				
		Lakisha	Shante		Brown		
Deb	otor .	First Name	Middle Name		Last Name	<del></del>	
	etor 2 euse if filing)	First Name	Middle Name		Last Name		
Unit	ted States i	Bankruptcy Court for th	<sub>ne:</sub> Eastem District	t of Virginia			
	e number nown)						Check if this is an amended filing
							-
Off	icial F	orm 106G	_				
Sc	hedi	ıle G: Exe	cutory (	Contra	acts and	Unexpired Leases	12/15
infor	mation. I		eded, copy the a	dditional pa	age, fill it out, nu	gether, both are equally responsible for sup imber the entries, and attach it to this page. (	
	No. C		le this form with th	ne court with	your other sched	fules. You have nothing else to report on this for e listed on <i>Schedule A/B: Property</i> (Official Form	
		, rent, vehicle lease				ract or lease. Then state what each contract on in the instruction booklet for more examples of	
	Person o	r company with w	hom you have th	e contract o	or lease	State what the contract or lease is fo	or .
2.1						_	
	Name						
	Number	Street				-	
	City	· · · · · · · · · · · · · · · · · · ·	State ZIP Co	ode		-	
2.2							•
	Name					•	
	Number	Street				-	
	City		State ZIP Co	ode		-	
2.3							
	Name					-	
	Number	Street				-	
	City		State ZIP Co	ode		-	
2.4						_	
	Name						
	Number	Street				-	
2.1	City		State ZIP Co	ode	<del></del>	-	
2.5						_	
	Name						
	Number	Street				-	

State

ZIP Code

City

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Case 19-73637-SCS Page 43 of 72 Document Lakisha Shante **Brown** Debtor 1 Case number (#k **Additional Page if You Have More Contracts or Leases** Person or company with whom you have the contract or lease What the contract or lease is for 2.2 Name Number Street City State ZIP Code 2.\_ Name Number Street City State ZIP Code 2\_ Name Number Street City State ZIP Code 2.\_ Name Number Street City ZIP Code State 2.\_ Name Number Street City State ZIP Code 2.\_ Name Number Street City State ZIP Code 2.\_ Name Number Street

City

Name

Number

Street

2.\_

ZIP Code

ZIP Code

State

State

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Fill in t	his information to ide	entify your case:				
Debtor 1	Lakisha	Shante	Brown			
DODIO	First Name	Middle Name	Last Name			
Debtor 2 (Spouse,	2 if filing) First Name	Middle Name	Last Name			
United S	States Bankruptcy Court fo	r the: Eastern District of Vin	ginia			
Case nu (If known						Check if this is an amended filing
Offici	al Form 106h	j.				amended ming
		<u>'-</u> our Codebtor	S			12/15
are filing and num case num	y together, both are en nber the entries in the mber (if known). Answ	qually responsible for su boxes on the left. Attach	pplying correct infor the Additional Page	mation. If more space to this page. On the	e is needed, copy the Ad top of any Additional Pa	ble. If two married people Iditional Page, fill it out, iges, write your name and
Z.	•		,	<b>-</b>	•	
	Yes					
		<b>ave you lived in a comm</b> u Louisiana, Nevada, New N		•		ritories include
_	No. Go to line 3.	Louisiana, Nevada, New N	lexico, Fuerto Rico, T	exas, wasimgton, an	u vviscorisiii.)	
		former spouse, or legal eq	uivalent live with you a	at the time?		
•	□ No	,	•			
	<u></u>	nunity state or territory did	you live?	. Fill in the	name and current address	of that person.
		•	-			·
	Nama of your engines for	ormer spouse, or legal equivalent				
	Name of your spouse, it	ormer spouse, or legal equivalent				
	Number Street					
	City	State	ZIF	<sup>5</sup> Code		
sho Sch	own in line 2 again as hedule D (Official Form	ur codebtors. Do not incl a codebtor only if that po n 106D), Schedule E/F (O tile G to fill out Column 2.	rson is a guarantor	or cosigner. Make su	ire you have listed the cr	editor on
Co	olumn 1: Your codebto	OF .		Col	umn 2: The creditor to w	nom you owe the debt
				Ch	eck all schedules that app	ly:
3.1					Schedule D, line	
` N	lame				Schedule E/F, line	
N	lumber Street				Schedule G, line	
<del>c</del>	ity	State		ZIP Code		
3.2	acy	Ç <u>al</u> a	•	3.7 0000		
Ш _	ame				Schedule D, line	
	·				Schedule E/F, line	_
Ñ	umber Street				Schedule G, line	-
	ity	State		ZIP Code		
3.3			<del></del>	<b>Q</b>	Schedule D, line	-
N	ame				Schedule E/F, line	
N	umber Street	<del> </del>			Schedule G, line	-
5	ity	State		7IP Code		

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Case number (if known)

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Lakisha Shante Brown Case no

Column 1:	Your codebtor			Column 2: The creditor to whom you owe the deb
				Check all schedules that apply:
Name				Schedule D, line
(VBII)Ç				☐ Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	_
Name				Schedule D, line
Mante				Schedule E/F, line
Number	Street			Schedule G, line
City	· · · · · · · · · · · · · · · · · · ·	State	ZIP Code	<u> </u>
				Schedule D, line
Name				Schedule E/F, line
	01-1			Schedule G, line
Number	Street			Gredule G, line
City	,	State	ZIP Code	_
Name				Gredule D, line
				☐ Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	_
				Schedule D, line
Name				☐ Schedule E/F, line
Number	Streat			□ Schedule G, line
City		State	ZIP Code	_
				— □ Schedule D, line
Name				Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	_
- <b>-</b>				Cohodula D. lima
Name				Schedule D, line
Number	Street			□ Schedule E/F, line □ Schedule G, line
City		State	ZIP Code	
Name				Schedule D, line
				Schedule E/F, line
Number	Street			Schedule G, line

Debtor 1

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Debtor 1   Lakisha   Shante   Brown   Justices   Debtor 2   Tristeer   Make home   Justices   Justices   Debtor 3   Tristeer   Make home   Justices   Ju						Ī	
Debtor 1   Debtor 2   Debtor 3   Debtor 4   Debtor 4   Debtor 5   Debtor 6   Debtor 6   Debtor 6   Debtor 7   Debtor 7   Debtor 7   Debtor 8   Debtor 8   Debtor 8   Debtor 9	Fill in this in	formation to identify	your case:				
Check if this is:   OA a namended filing   Full learner   Check if this is:   OA a namended filing   OA supplement showing postpetition chapter 13 income as of the following date:   Nam / DD / YYYY   OA   OA   OA   OA   OA   OA   OA	Debtor 1	Lakisha	Shante	Brown		;	
United States Bankuptoy Count for the Leastern District of Virginia  Check if this is:  Check if this is:  An amended filing And a supplementary   But a complete act the tolowing attempts a possessive in a needed, stach a separate age of an amended and our appropriate acts and assert avery question.  But a filing An amended filing An amended filing And An amended filing		First Name	Middle Name	Last Name			
Check if this is:    An amended filing   A supplement showing postpetition chapter 13 income as of the following date:   MM / DD / YYYY		First Name	Middle Name	Last Name	<del></del>		
An amended filing   A supplement showing postpetition chapter 13 income as of the following date:	United States	Bankruptcy Court for the: E	Eastern District of Virginia				
An amended filing  A supplement showing postpetition chapter 13 income as of the following date:    A supplement showing postpetition chapter 13 income as of the following date:			<del></del>			Check if th	nis is:
Official Form 106   Schedule I: Your Income  12/15  Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is hiring with you, in notion about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (If known). Answer every question.  Purt 1: Describe Employment  If you have more than one job, attach a separate page with information. If you have more than one job, attach a separate page with information about your spouse. If more space is needed, attach a separate page with information.  If you have more than one job, attach a separate page with information about your spouse. If more space is needed, attach a separate page with information about your spouse. If more space is needed, attach a separate page with information about additional include part-time, seasonal, or self-employed work.  Cocupation may include student or homemaker, if it applies.  Employer's name  Employer's address  Chesapeake Public Schools  Employer's address  312 Cedar Road  Number Street  Number Street  Number Street  Number Street  Port 22  Give Details About Monthly Income  Estimate morthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 For Debtor 2 or non-filing spouse.  2. List morthly gross wages, salary, and commissions (before all payroli deductions). If not paid monthly, calculate what the morthly wage would be.  2. Estimate and list monthly overtime pay.	(II KIOWII)						
Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse is provided in the provided							
Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, on continuous information about your spouse. If more space is needed, stach a separate and your spouse is not filling with you, do not include information about your spouse. If more space is needed, stach a separate speed to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: bescribe Employment  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation Marker, if it applies.  Occupation Bus Assisant  Chesapeake Public Schools  Employer's address  Employer's address  Employer's address  The work of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you row non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you row non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you roy un on-filing spouse.  1. Estimate and list monthly overtime pay.  2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  3. Estimate and list monthly overtime pay.	Official Fo	orm 106l				MM / DI	D/ YYYY
supplying correct information. If you are married and not filling jointly, and your spouse is Niring with you, or spouse spouse in the filing with you, do not include information about your spouse. If more space is needed, stach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Describe Employment  1. Fill in your employment	Sched	lule I: You	r Income				12/15
If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Employer's name  Employer's name  Chesapeake Public Schools  Employer's address  Employer's address  Employer's address  The without the student or homemaker, if it applies.  Employer's address  Employer's name  Chesapeake Public Schools  Employer's address  Toky  State ZIP Code  Toky  State	supplying co if you are set separate she	rrect information. If your spouest and your spouest to this form. On the	ou are married and not filir ise is not filing with you, d top of any additional page	ng jointly, and you to not include info	ur spouse ormation a	is living with your spou	ou, include information about your spouse. use. If more space is needed, attach a
If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Employer's name  Chesapeake Public Schools  Employer's address  312 Cedar Road  Number Street  Chesapeake VA 23323  City State ZIP Code  How long employed there? 3 Years  State ZIP Code  To you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 For Debtor 2 or non-filing spouse base words and payed in the monthly wage would be.  2. \$1,208.82 \$  \$1,208.82 \$  \$1,208.82 \$  \$1,208.82 \$  \$1,208.82 \$  \$1,208.82 \$  \$1,208.82 \$  \$1,208.82 \$  \$1,208.82 \$  \$1,208.82 \$  \$1,208.82 \$  \$1,208.82 \$  \$1,208.82 \$  \$1,208.82 \$  \$1,208.82 \$  \$1,208.82 \$  \$1,208.82 \$  \$1,208.82 \$  \$1,208.82 \$  \$1,208.83 \$  \$1,208				Debtor 1		· · · · · · · · · · · · · · · · · · ·	Debtor 2 or non-filling spouse
atiach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work.  Coccupation may include student or homemaker, if it applies.  Employer's name  Chesapeake Public Schools  Employer's address  312 Cedar Road  Number Street  City State ZIP Code  How long employed there? 3 Years  Street  City State ZIP Code  How long employed there? 3 Years  Street  For Debtor 1 For Debtor 2 or non-filing spouse  List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly overtime pay.  Employer's address  Significant page in played   Employed   Employed   Not employ							The state of the s
Occupation may include student or homemaker, if it applies.  Employer's name  Chesapeake Public Schools  Employer's address  The street  Chesapeake Public Schools  Employer's address  The street  Chesapeake VA 23323  City State ZIP Code  City State ZIP Code  The street Street  City State ZIP Code  The street Street State Street State Street State Street Str	attach a se information	eparate page with n about additional	Employment status		ed		' ' '
Occupation may include student or homemaker, if it applies.  Employer's name  Chesapeake Public Schools  Employer's address  312 Cedar Road  Number Street  Number Street  Number Street  Chesapeake VA 23323  City State ZIP Code  How long employed there? 3 Years  State ZIP Code  How long employed there? 3 Years  State ZIP Code  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 For Debtor 2 or non-filing spouse  2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 1,208.82 \$							
Employer's address    Street   Number   Street   Number   Street   Number   Street	Occupatio	n may include student	Occupation	Bus Assisant			
Chesapeake VA 23323  City State ZIP Code City State ZIP Code  How long employed there? 3 Years  Part 2: Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 For Debtor 2 or non-filing spouse  2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  3. Estimate and list monthly overtime pay.  3. +\$  0 + \$  1.208.82			Employer's name	Chesapeake I	Public Se	chools	
Chesapeake VA 23323  City State ZIP Code City State ZIP Code  How long employed there? 3 Years  Part 2: Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 For Debtor 2 or non-filing spouse  2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  3. Estimate and list monthly overtime pay.  3. +\$  0 + \$  1.208.82			Caralanada addasas	040 Codes De			
Part 2: Give Details About Monthly income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 For Debtor 2 or non-filing spouse  2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  3 Years  3 Years  The Debtor 1 for any line, write \$0 in the space. Include your non-filing spouse on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 for Debtor 2 or non-filing spouse  2. \$ 1,208.82 \$			Employer's address		au	to # 2 - Ay	Number Street
Part 2: Give Details About Monthly income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 For Debtor 2 or non-filing spouse  2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  3 Years  3 Years  The Debtor 1 for any line, write \$0 in the space. Include your non-filing spouse on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 for Debtor 2 or non-filing spouse  2. \$ 1,208.82 \$				-			
Part 2: Give Details About Monthly income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 For Debtor 2 or non-filing spouse  2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  3 Years  3 Years  The Code City State ZIP Code City State				Chesapeake	VA	23323	<del></del>
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 For Debtor 2 or non-filing spouse  2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  3. Estimate and list monthly overtime pay.  3. + \$					State 2	IP Code	City State ZIP Code
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 For Debtor 2 or non-filing spouse  2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  3. Estimate and list monthly overtime pay.  3. +\$			How long employed then	e? 3 Years			3 Years
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 For Debtor 2 or non-filing spouse  2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  3. Estimate and list monthly overtime pay.  3. +\$	Part 2:	Give Details About	Monthly Income				
If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 For Debtor 2 or non-filing spouse  2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 1,208.82 \$ \$	Estimate	monthly income as of	the date you file this form	. If you have nothi	ng to repo	rt for any line, wr	ite \$0 in the space. Include your non-filing
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  3. Estimate and list monthly overtime pay.  3. +\$ 0 +\$ 1,208.82	If you or y	our non-filing spouse ha	ave more than one employer		rmation fo	r all employers fo	or that person on the lines
deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 1,208.82 \$  3. +\$ 0 + \$						For Debtor 1	- "
3. Estimate and list intributy overdine pay.					2. <b>\$</b>	1,208.82	\$
4. Calculate gross income. Add line 2 + line 3. 4. \$\$	3. <b>Estimate</b>	and list monthly over	rtime pay.		3. <b>+</b> \$	0	+ \$
	4. Calculate	e gross income. Add (i	ne 2 + line 3.		4. \$	1,208.82	\$

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Brown

For Debtor 1 For Debtor 2 or non-filing spouse 830.60 Copy line 4 here..... 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 34.27 5a. 0 5b. Mandatory contributions for retirement plans 5b. 5c. Voluntary contributions for retirement plans 0 5¢. 0 0 5d. Required repayments of retirement fund loans 5d. 0 0 5e. Insurance 5e. 0 0 5f. Domestic support obligations 5f. 0 0 5g 5g. Union dues 0 5h. Other deductions. Specify: 5h. 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 34.27 796.33 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0 monthly net income. 8a. 0 8b. Interest and dividends 8b. 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 572.22 settlement, and property settlement. 8c 8d. Unemployment compensation 8d 8e. Social Security 8e 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Medicaid 0 8f. 0 8g. Pension or retirement income 8g. 0 8h. Other monthly income. Specify: 8h Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8q + 8h. 9. 10. Calculate monthly income. Add line 7 + line 9. 1.368.55 1,368.55 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: Medicaid 0 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 1,368.55 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? ☐ No. Do not work during the months Public Schools are out which is June 13 till September 3. Yes. Explain:

Lakisha

Debtor 1

Shante

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Fill in this	information to identify	your case:				
Debtor 1	Lakisha	Shante Br	own	O		
Debtor 2	First Name	Middle Name Last N	ame	Check if this is:		
(Spouse, if fili	ng) First Name	Middle Name Last N	ame	An amended	-	petition chapter 13
United State	es Bankruptcy Court for the:	Eastern District of Virginia			of the following	
Case number	er			MM / DD / YYY	Υ	
(***		<u></u>				
Official	Form 106J					
Sche	dule J: Yo	ur Expenses				12/15
information						
1. Is this a j	oint case?		······································			
	30 to line 2.					
	Does Debtor 2 live in a s	separate household?				
	No Yes. Debtor 2 must fik	e Official Form 106J-2, Expenses	s for Separate Housel	old of Debtor 2.		
2. Do you h	ave dependents?	□ No	Dependent's re	Mationship to	Dependent's	Does dependent live
Do not list Debtor 2.	t Debtor 1 and	Yes. Fill out this informatio each dependent	n for Debtor 1 or De		age	with you?
Do not sta	ate the dependents'		Daughter		19	Ū No ☑ Yes
names.						□ No
			<del></del>	· · · · · · · · · · · · · · · · · · ·		☐ Yes
				<u></u>		☐ No ☐ Yes
						□ res
			<u> </u>			Yes
						□ No
				<del></del> .		Yes
expenses	expenses include s of people other than and your dependents?	☑ No ☐ Yes				
Part 2;	Estimate Your Ongol	ng Monthly Expenses				
-	s of a date after the ban	bankruptcy filing date unless kruptcy is filed. If this is a sup	-			
•	•	i-cash government assistance if it on Schedule I: Your Income	•		Your expe	nses
	tal or home ownership of for the ground or lot.	expenses for your residence. I	nclude first mortgage (	payments and 4.	\$	550.00
If not in	cluded in line 4:					_
4a. Re	al estate taxes			<b>4a</b> .	\$	0
4b. Pro	operty, homeowner's, or r	enter's insurance		<b>4</b> b.	\$	0
4c. Ho	me maintenance, repair,	and upkeep expenses		<b>4c</b> .	\$	0
4d. Ho	meowner's association or	r condominium dues		4d.	\$	0

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Debtor 1 Lakisha Shante Brown Case number (# known)\_\_\_\_

			Your exp	enses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0
	Utilities:			
о.	6a. Electricity, heat, natural gas	6a.	\$	0
	6b. Water, sewer, garbage collection	6b.	\$	0
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	150.00
	6d. Other Specify:	6d.	\$	
7.		7.	\$	125.00
8.	Childcare and children's education costs	8.	<b>s</b>	270.25
9.	Clothing, laundry, and dry cleaning	9.	\$	100.00
10.	Personal care products and services	10.	\$	50.00
11.	Medical and dental expenses	11.	\$	0
	Transportation. Include gas, maintenance, bus or train fare.			130.00
12	Do not include car payments.	12.	\$	130.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0
14.	Charitable contributions and religious donations	14.	\$	30.00
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	13.26
	15b. Health insurance	15b.	\$	0
	15c. Vehicle insurance	15c.	\$	86.00
	15d. Other insurance. Specify:	15d.	\$	0
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$	0
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17 <b>a</b> .	\$	307.43
	17b. Car payments for Vehicle 2	17b.	\$	0
	17c. Other. Specify:	17c.	\$	0
	17d. Other. Specify:	17 <b>d</b> .	\$	0
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ie.		_
	20a. Mortgages on other property	20a.	\$	0
	20b. Real estate taxes	20b.	\$	0
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0
	20e. Homeowner's association or condominium dues	20e.	\$	0

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Debtor	1 Lakisha Frat Name	Middle Name	Shante Last Name	Brown	Case number (# known)	<del></del> .	
21. <b>Ö</b> t	her. Specify:				21	. +\$	0
22. <b>Ca</b>	iculate your monti	hiy expenses	s <b>.</b>				
22	a. Add lines 4 throug	gh 21.			<b>22</b> a.	\$	1,811.94
22	b. Copy line 22 (mo	nthly expense	es for Debtor 2), if a	ny, from Official Form 106J-	2 22b.	\$	0
22	c. Add line 22a and	22b. The resi	ult is your monthly e	expenses.	22c.	\$	1,811.94
23. Cal	culate your month	ly net incom	<b>9</b> .				1,368,55
23a.	Copy line 12 (you	ur combined i	nonthly income) fro	m <i>Schedule I</i> .	23a	. \$	1,300,33
23b.	Copy your month	ily expenses (	from line 22c above	•	23b	- \$	1,811.94
23c.	Subtract your mo The result is your	- •	es from your month income.	ly income.	230	\$	-443.39

### 24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

M No.

Yes. Explain here:

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Onicial				
Official	Form 106	6Dec		
(If known)				Check if this is amended filing
Case number	ankruptcy Court for	r the: Eastern District of Vii	rginia	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
	_akisha First Name	Shante Middle Name	Brown Last Name	

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20

If two married people are filing together, both are equally responsible for supplying correct information. years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? ₩ No Yes. Name of person\_ \_ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. Date 10/01/2019 Date MM / DD / YYYY MM / DD / YYYY

Official Form 106Dec

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Bbtor 1	Lakisha	Shante	Brown		
btor 2	First Name	Middle Name	Last Name		
	g) First Name	Middle Name	Last Name		
ted States	Bankruptcy Court for t	the: Eastern District of V	/irginia		
se numbei (nown)	f		<del></del>		☐ Check if this is a
		- <del></del>	<del></del>		amended filing
ficial	Form 107				
		ancial Affai	re for Indiv	iduals Filing for Ban	
				y together, both are equally responsib m. On the top of any additional pages,	
	nown). Answer eve				, ,
art 1:	Give Details Abo	out Your Marital Sta	tus and Where Y	ou Lived Before	
What is	your current marit	al status?			
	-				
☐ Man ☑ Not					
During t	he last 3 years, ha	ve you lived anywhere	other than where y	ou live now?	
During to	ne last 3 years, ha	ve you lived anywhere	other than where y	ou live now?	
☑ No		ve you lived anywhere s you lived in the last 3			
☑ No ☐ Yes.					Dates Debtor 2 lived there
☑ No ☐ Yes.	List all of the places		years. Do not include  Dates Debtor 1	e where you live now.	lived there
☑ No ☐ Yes.	List all of the places		years. Do not include  Dates Debtor 1  lived there	e where you live now.  Debtor 2:	lived there  Same as Debtor
☑ No □ Yes.	List all of the places		years. Do not include  Dates Debtor 1 lived there  From	e where you live now.  Debtor 2:	lived there  Same as Debtor  From
☑ No □ Yes.	List all of the places		years. Do not include  Dates Debtor 1  lived there	Debtor 2:  Same as Debtor 1	lived there    Same as Debtor
No Yes.	List all of the places btor 1:	s you lived in the last 3	years. Do not include  Dates Debtor 1 lived there  From	Debtor 2:  Same as Debtor 1  Number Street	lived there  Same as Debtor  From  To
☑ No □ Yes.	List all of the places btor 1:		years. Do not include  Dates Debtor 1 lived there  From	Debtor 2:  Same as Debtor 1	lived there  Same as Debtor  From  To
No Yes.	List all of the places btor 1:	s you lived in the last 3	years. Do not include  Dates Debtor 1 lived there  From	Debtor 2:  Same as Debtor 1  Number Street	lived there  Same as Debtor  From  To
No Yes.	List all of the places btor 1:	s you lived in the last 3	years. Do not include  Dates Debtor 1 lived there  From To	Same as Debtor 1  Number Street  City State Zi	Same as Debtor   From   To   P Code   Same as Debtor
No Yes.  De	List all of the places btor 1:	s you lived in the last 3	years. Do not include  Dates Debtor 1 lived there  From To	Same as Debtor 1  Number Street  City State Zi	Same as Debtor  From  To  P Code  Same as Debtor
No Yes.  De	List all of the place: btor 1: umber Street	s you lived in the last 3	years. Do not include  Dates Debtor 1 lived there  From To	E where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State Zi	Same as Debtor   From   To   P Code   Same as Debtor
No Yes.  De	List all of the place: btor 1: umber Street	s you lived in the last 3	years. Do not include  Dates Debtor 1 lived there  From To	E where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State Zi	Same as Debtor  From  To  P Code  Same as Debtor
No Yes.	List all of the place: btor 1: umber Street	s you lived in the last 3	years. Do not include  Dates Debtor 1 lived there  From To	E where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State Zi	From Same as Debtoo
No Yes.	List all of the place: btor 1: umber Street	s you lived in the last 3	years. Do not include  Dates Debtor 1 lived there  From To	E where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State Zi	Same as Debtor  From  To  P Code  Same as Debtor
No Pes.  De No Pes.	List all of the places btor 1:  umber Street  ty  the last 8 years, did	State ZIP Code	years. Do not include  Dates Debtor 1 lived there  From To  From To  Pouse or legal equi	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State Zi  Number Street  City State Zi  Number Street	Same as Debtor   From   To
No Yes.  De No Ci	List all of the places btor 1:  umber Street  ty  the last 8 years, did	State ZIP Code	years. Do not include  Dates Debtor 1 lived there  From To  From To  Pouse or legal equi	Pebtor 2:  Same as Debtor 1  Number Street  City State Zi  Number Street  City State Zi	Same as Debtor   From   To
No Pes.  No	List all of the places btor 1:  umber Street  ty  the last 8 years, did not territories include	State ZIP Code  State ZIP Code	pates Debtor 1 lived there  From To  From To  pouse or legal equi	City State  Same as Debtor 1  Number Street  City State Zi  Number Street  City State Zi  Number Street	Same as Debtor   From   To
No Pes.  No	List all of the places btor 1:  umber Street  ty  the last 8 years, did not territories include	State ZIP Code	pates Debtor 1 lived there  From To  From To  pouse or legal equi	City State  Same as Debtor 1  Number Street  City State Zi  Number Street  City State Zi  Number Street	Same as Debtor   From   To

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ebtor 1	Lakisha Shante	Brown	Case nu	mber (if known)	
	First Name Middle Name La	Name			
Fill in	you have any income from employm n the total amount of income you receiv u are filing a joint case and you have in	ed from all jobs and all bus	inesses, including part-tir	ne activities.	ondar years?
	<del></del>				
<b>21</b> v	es. Fill in the details.		T CHARGO THE MYSTESSOL		
			_		_
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions an exclusions)
	From January 1 of current year until	Wages, commissions, bonuses, tips	s 5,608.24	☐ Wages, commissions, bonuses, tips	\$
•	the date you filed for bankruptcy:	Operating a business	-	Operating a business	
	For last calendar year:	Wages, commissions,	s 9,503.31	Wages, commissions,	
	(January 1 to December 31,2018	bonuses, tips  Operating a business	\$	bonuses, tips  Operating a business	\$
	For the calendar year before that:	Wages, commissions,		☐ Wages, commissions,	
	(January 1 to December 31, 2017	bonuses, tips  Operating a business	\$ <u>8,376.93</u>	bonuses, tips  Operating a business	\$
List e	each source and the gross income fron No	each source separately. D	o not include income tha	t you listed in line 4.	
₩ Y	es. Fill in the details.				
		Sources of Income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross Income from each source (before deductions ar exclusions)
	From January 1 of current year unti	Child Support	\$5,149.98	**************************************	- \$
	the date you filed for bankruptcy:				
			\$		- \$ <u> </u>
					- \$ - \$
	For last calendar year:		\$		- \$
	(January 1 to December 31,2018)				- \$ - \$
					- \$
	(January 1 to December 31,2018)		\$ \$		- \$
	(January 1 to December 31, 2018 )		\$ \$		- \$

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<ul> <li>6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?</li> <li>□ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § "incurred by an individual primarily for a personal, family, or household purpose."</li> <li>□ During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?</li> <li>□ No. Go to line 7.</li> <li>□ Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such a child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.</li> </ul>	e
<ul> <li>6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?</li> <li>□ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § "incurred by an individual primarily for a personal, family, or household purpose."</li> <li>□ During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?</li> <li>□ No. Go to line 7.</li> <li>□ Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such a</li> </ul>	e
<ul> <li>No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § "incurred by an individual primarily for a personal, family, or household purpose."</li> <li>During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?</li> <li>No. Go to line 7.</li> <li>Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such a</li> </ul>	e
<ul> <li>"incurred by an individual primarily for a personal, family, or household purpose."</li> <li>During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?</li> <li>No. Go to line 7.</li> <li>Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such a</li> </ul>	e
<ul> <li>□ No. Go to line 7.</li> <li>□ Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such a support of the content of the cont</li></ul>	e s
Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such a support obligation.	e s
total amount you paid that creditor. Do not include payments for domestic support obligations, such a	e s
* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment	nt.
☑ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.	
During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?	
52 No. Go to line 7.	
Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.	
Dates of Total amount paid Amount you still owe payment	Was this payment for
\$ \$	
Creditor's Name	Car
Number Street	Credit card
	Loan repayment
	☐ Suppliers or vendors
City State ZIP Code	☐ Other
\$\$\$	
Creditor's Name	☐ Car
Number Street	Credit card
	Loan repayment
	☐ Suppliers or vendors
City State ZIP Code	Other
\$ <b>\$</b>	
Creditor's Name	— □ Mongage
	Credit card
Number Street	Loan repayment
	Suppliers or vendors
	Other
City State ZIP Code	

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otor 1	Lakisha First Name	Si Middle Name	nante Leet Name	Brown		Case number (# known)_	_ <del>.</del>
							rho was an insider? n you are a general partner;
corporagent,	ations of which	you are an offic for a business y	cer, director, per	son in control, or	owner of 20% or r	nore of their voting	securities; and any managing domestic support obligations,
Ø No □ Ye		ents to an insid	er.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Īn	nsider's Name				\$	\$	
N	lumber Street						
- c	City	Sta	te ZIP Code	<u> </u>			
_					\$	\$	
_	nsider's Name						
-							
c	City	Sta	te ZIP Code	-			
an ins	sider?		ankruptcy, did		ayments or trans	fer any property o	n account of a debt that benefit
☑ No	)	-		y an mondor.			
☐ Ye	es. List all paym	ents that benefi	ited an insider.	Dates of	Total amount	Amount you still	Reason for this payment
				payment	paid	owe	Include creditor's name
Īr	nsider's Name				\$	<b>\$</b>	
N	Number Street						
- č	Dity	Sta	nte ZIP Code				
					\$	<b>\$</b>	
Îr	nsider's Name						
N	Number Street		. , <u>"</u>	<del>-</del>			
-							

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tor 1	Lakisha First Name Mid	Shante  Shante  Leet Name	Brown	Case number (# Inown)		
	Latine (page 162)	The tenths				
rt 4:	Identify Legal	Actions, Repossessic	ons, and Foreclosur	es		
				awsuit, court action, or administra		
	II such matters, inclu ontract disputes.	ading personal injury case:	s, small claims actions, c	livorces, collection suits, paternity a	ctions, sup	port or custody modifica
í N	0					
Y	es. Fill in the details					
		Nati	ere of the case	Court or agency		Status of the cas
						Pending
(	Case title			Court Name		On appeal
-				Number Street		Concluded
	Saca numbar			Handa Sheer		- Conducti
•				City State 2	IP Code	<del></del>
(	Case title			Court Name		Pending
						On appeal
-				Number Street		Concluded
(	Case number					
				City State 2	iP Code	<del></del>
J Y	es. Fill in the informa	ation below.	Describe the prope	rtv	Date	Value of the propert
				•		
	Creditor's Name		<u> </u>			\$
	Sistant Citatio					
	Number Street		Explain what happe	med		
			Property was	repossessed.		
			Property was			
	-		Property was			
	City	State ZIP Code		attached, seized, or levied.		
			Describe the prope	rty	Date	Value of the prope
						s
	Creditor's Name			-	•	
	Number Street		<del></del>			
	Number Street		Explain what happe	ened		
			Property was	repossessed.		
			Property was			
	City	State ZIP Code	— Property was			
			Property was	attached, seized, or levied.		

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э <del>г</del> 1	Lakisha	Shante	Brown	Case number (if known)	
	First Name	Middle Name Last I	tame		
LESTAL	hin 90 daya bafa	en you find for bonkmy	والمراجعة ومقالهم ومرور والمراجعة	g a bank or financial institution, set off any a	
			ause you owed a debt?	g a pank or nnancial insulution, set on any a	imounts from your
<b>5</b>			,		
	Yes. Fill in the de	taile			
			Describe the action the credito	r took Date action was taken	Amount
7	Creditor's Name		•	was taken	
ī	Number Street				\$
-		<del> </del>			
_					
	City	State ZIP Code	Last 4 digits of account numb	er: XXXX	
	·-	=		n the possession of an assignee for the bene	fit of
	_	ppointed receiver, a cus	stodian, or another official?		
<b>4</b>					
	Yes				
	<b>.</b>		44		
irt 5	List Certai	n Gifts and Contribu	tions		
	_	e you filed for bankrup	tcy, did you give any gifts witt	h a total value of more than \$600 per person?	F.
<b>√</b>					
	Yes. Fill in the de	tails for each gift.			
		value of more than \$600	Describe the gifts	Dates you gave the gifts	Value
	per person			tie gins	
ī	Person to Whom You (	Save the Gift		<del></del>	\$
					\$
i	Number Street				
7	City	State ZIP Code			
	Dansan'a raistinasti	n to you			
	Person's relationshi	p to you			
	Citia with a tatal	alue of more than \$600	Describe the sile	Paten and a second	Volum
	ents with a total vi per person	enes of thors figu \$600	Describe the gifts	Dates you gave the gifts	Value
				-	
					\$
ī	Person to Whom You (	Save the Gift			
					e
-				<del></del>	Φ
i	Number Street				
,	City	State ZIP Code			
,	- City	SIZIE ZIF COUR			
1	Person's relationshi	p to you			

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ebtor 1	Lakisha	Shante		Case number (if known)	
	First Name Middle I	Name Last Na	me.		
. Withi	in 2 years before you	filed for bankrupto	y, did you give any gifts or contributio	ns with a total value of more than \$	600 to any charity?
<b>₫</b> N					
☐ Y	es. Fill in the details for	r each gift or contrit	oution.		
	Gifts or contributions to		Describe what you contributed	Date you	Value
•	that total more than \$600	0		contributed	
č	harity's Name			<del></del>	\$
					e
_				<del></del>	<b>4</b>
	umber Street				
N	umber Street				
_					
C	ity State ZIP (	Code			
art 6:	List Certain Los	sses			
	Describe the property yo how the loss occurred	ou lost and	Describe any insurance coverage for the lo Include the amount that insurance has paid. L claims on line 33 of Schedule A/B: Property.	loss	Value of property lost
				<del></del>	\$
	I				
art 7:	<u> </u>				
			/, did you or anyone else acting on you preparing a bankruptcy petition?	r behalf pay or transfer any propert	y to anyone
-			arers, or credit counseling agencies for se	ervices required in your bankruptcy.	
<b>☑</b> N	ło				
☐ Y	es. Fill in the details.				
	Person Who Was Paid		Description and value of any property trans	sferred Date payment or transfer was made	Amount of payment
	Number Street			<del> </del>	\$
					\$
•					\$
	City S	state ZIP Code			
•	Email or website address	· · · · ·			
	Person Who Made the Payme	ent, if Not You			

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			Shante	Brown	Case number (# known)_		
	First Name	Middle Name	Last N	lame	·		
,	· Line   Light of Auditorian American	n (are and round an order		v		ART AND TRANSPORTS AND THE TRANSPORTS OF	ener or more experience with the contract of t
				Description and value of any prop	erty transferred	Date payment or transfer was made	Amount of payment
	Person Who Was P	aid					¢
	Number Street					<del></del>	Φ
							\$
	City	State	ZIP Code				
	Email or website add	dress					
	Person Who Made t	he Payment, if N	lot You				
<b>1</b>			ansier that yo	ou listed on line 16.			
				Description and value of any prop	erty transferred	Date payment or transfer was made	Amount of pay
	Person Who Was P	'aid					
							•
	Number Street						4
	Number Street						\$ \$
. With	City	State <b>ore you filed</b>	ZIP Code for bankrupt	tcy, did you sell, trade, or other	wise transfer any property	to anyone, other th	\$an property
tran Inclu Do r	City  hin 2 years before the country to the country	ore you filed ordinary cou t transfers ar and transfers	for bankrupt rse of your b nd transfers m	tcy, did you sell, trade, or other ousiness or financial affairs? hade as security (such as the gran e already listed on this statement.	ting of a security interest or		
tran Inclu Do r	City  hin 2 years beforesferred in the coude both outright not include gifts:  No	ore you filed ordinary cou t transfers ar and transfers	for bankrupt rse of your b nd transfers m	ousiness or financial affairs? nade as security (such as the gran	ting of a security interest or	mortgage on your pro	operty).
tran Inclu Do r	City  hin 2 years beforesferred in the coude both outright not include gifts:  No	ore you filed ordinary cou t transfers ar and transfers etails.	for bankrupt rse of your b nd transfers m	pusiness or financial affairs?  ade as security (such as the grante already listed on this statement.  Description and value of property	ting of a security interest or to the security interest or the security	mortgage on your pro	pperty).  Date transf
tran Inclu Do r	City  hin 2 years before the country of the country	ore you filed ordinary cou t transfers ar and transfers etails.	for bankrupt rse of your b nd transfers m	pusiness or financial affairs?  ade as security (such as the grante already listed on this statement.  Description and value of property	ting of a security interest or to the security interest or the security	mortgage on your pro	operty).  I Date transi
tran Inclu Do r	City  hin 2 years before the considered in the control outright and include gifts:  No Yes. Fill in the difference who Receives	ore you filed ordinary cou t transfers ar and transfers etails.	for bankrupt rse of your b nd transfers m	pusiness or financial affairs?  ade as security (such as the grante already listed on this statement.  Description and value of property	ting of a security interest or to the security interest or the security	mortgage on your pro	operty).  I Date transi
tran Inclu Do r	City  hin 2 years before the country of the country	ore you filed ordinary could transfers and transfers etails.	for bankruph trae of your b that you have	pusiness or financial affairs?  ade as security (such as the grante already listed on this statement.  Description and value of property	ting of a security interest or to the security interest or the security	mortgage on your pro	pperty).
tran Inclu Do r	City  hin 2 years before the course of the c	ore you filed ordinary count transfers and transfers etails.	for bankruph trae of your b that you have	pusiness or financial affairs?  ade as security (such as the grante already listed on this statement.  Description and value of property	ting of a security interest or to the security interest or the security	mortgage on your pro	pperty).
tran Inclu Do r	City  hin 2 years beforesferred in the consideration of the consideratio	ore you filed ordinary count transfers and transfers etails.	for bankruph trae of your b that you have	pusiness or financial affairs?  ade as security (such as the grante already listed on this statement.  Description and value of property	ting of a security interest or to the security interest or the security	mortgage on your pro	pperty).  Date transf
tran Inclu Do r	City  hin 2 years before the country of the country	ore you filed ordinary count transfers and transfers etails.	for bankruph rise of your b d transfers m s that you hav	pusiness or financial affairs?  ade as security (such as the grante already listed on this statement.  Description and value of property	ting of a security interest or to the security interest or the security	mortgage on your pro	pperty).  Date transf

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Name of Financial Institution    Number Street	ebtor 1	Lakisha	Shante	Brown	Case number (# Im	Owers)	
are a boneficiary? (These are often called asset-protection devices.)    Note   Note   Description and value of the property transferred		First Name	Middle Name Last Name				
are a beneficiary? (These are often called asset-protection devices.)    Note							
are a boneficiary? (These are often called asset-protection devices.)    Note   Note   Note	^ USSAL	in 40 vanm bafan	a var filad for bankst	. did was transfer and manage	to to a self pettled two	e as aissilas davias af v	shiah saas
Description and value of the property transferred  Description and value of the property transferred  Name of trust					ty to a sen-settled tru	st of Similar device of v	rnich you
Yes. Fill in the details.   Description and value of the property transferred   Date transfer was made		• •	tood and often damou adder	procedulari de ricco.,			
Name of frust    List Certain Financial Accounts, instruments, Safe Deposit Boxes, and Storage Units			.9.				
Name of trust	י ש	res. Fill in the deta	aus.				
Name of trust    Name of trust				Description and value of the prope	erty transferred		Date transfer
D. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.    No							was made
D. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.    No							
D. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.    No	١	lame of trust					<del></del>
Describe the contents   Instruments   Instru							
D. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.    No	-						
D. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.    No							
Describe the contents   Desc	art 8:	•					A 1 100 ME 3 1 100 ME
Closed, sold, moved, or transferred?   Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.    Last 4 digits of account number   Type of account or instrument   Data account was closed, sold, moved, or transferred						<del></del>	
Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.    No   Yes. Fill in the details.				were any financial accounts o	or instruments held in	your name, or for your	benefit,
brokerage houses, pension funds, cooperatives, associations, and other financial institutions.    No							
Last 4 digits of account number   Type of account or instrument   Date account was closed, sold, moved, or transferred   Checking   Savings   Money market   Brokerage   Other   Savings   Sa						ares in banks, credit un	ions,
Yes. Fill in the details.   Last 4 digits of account number   Type of account or instrument   Check, sold, moved, or transferred   Checking   \$		-	ension funds, cooperative	es, associations, and other fi	nancial institutions.		
Last 4 digits of account number Type of account or instrument    Date account was closed, sold, moved, or transferred			1_71_				
Name of Financial Institution	<b>U</b>	res. Fill in the de	ialis.				
Name of Financial Institution  XXXX			ı	Last 4 digits of account number			Last balance before
Number Street    Savings   Money market   Brokerage					in <b>s</b> cum <del>o</del> nc		Crosing or transfer
Number Street    Savings   Money market   Brokerage							
Money market   Brokerage   Other		Name of Financial Ins	titution 2	xxxx	☐ Checking		\$
Money market   Brokerage   Other		Mumber Street			☐ Savings		
Brokerage   Other		Number Street			_		
City State ZIP Code  XXXX Checking							
Name of Financial Institution    Name of Financial Institution   Savings		City	State ZIP Code		-		
Number Street    Money market   Brokerage   Other		,			U Other		
Name of Financial Institution    Savings     Money market     Brokerage     Other					_		
Number Street    Money market   Brokerage   Other		Name of Financial Ins	titution 7	xxxx	_	<del></del>	\$
Brokerage  Other  Other  Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  No Yes. Fill in the details.  Who else had access to it?  Describe the contents  Do you st have it?  No Name of Financial Institution  Name					☐ Savings		
City State ZIP Code  1. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  No  Yes. Fill in the details.  Who else had access to it?  Describe the contents  Do you st have it?  No  Name of Financial institution  Name		Number Street	<u> </u>		Money market		
i. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  No Pes. Fill in the details.  Who else had access to it?  Describe the contents  Do you st have it?  No Name of Financial Institution  Name					■ Brokerage		
1. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  No Yes. Fill in the details.  Who else had access to it?  Describe the contents  Do you st have it?  No Name of Financial Institution  Name					Other		
Securities, cash, or other valuables?  No Yes. Fill in the details.  Who else had access to it?  Describe the contents  Do you st have it?  No Name of Financial institution  Name		City	State ZIP Code				
Securities, cash, or other valuables?  No Yes. Fill in the details.  Who else had access to it?  Describe the contents  Do you st have it?  No Name of Financial Institution  Name	Day	annow have or	did you have within 1 year	u bafam van filad far bankruu	utani ami eafa danaeit	hav as ather densaitan	
No Yes. Fill in the details.  Who else had access to it?  Describe the contents  Do you st have it?  No Name of Financial Institution  Name				ii botote you incu tor build u	out, any oute deposit	nox or other depository	, 101
Who else had access to it?  Describe the contents  Do you st have it?  Name of Financial Institution  Name  Name	-						
Name of Financial Institution Name See See See See See See See See See S	□ Y	es. Fill in the det	tails.				
Name of Financial Institution Name State S			•	Who else had access to it?	Describe ti	e contents	Do you still
Name of Financial Institution Name							
Name							□ No
Trains		Name of Financial Ins	titution				☐ Yes
Number Street Number Street			N	apres			
Lewithon Cut and		Number Street		umher Street			
			•	uningi su oot			
		CHu	Chate ZID Code	ity State ZIP Code			

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ebtor 1	Lakisha First Name N	Shante Middle Name Last	Brown	Case number (# Innown)	
22. Have <b>5⁄3</b> N		rty in a storage unit e	or place other than your hom	e within 1 year before you filed for bankruptcy	?
□ Y	es. Fill in the deta	ils.	Who else has or had access to	b it? Describe the contents	Do you still have it?
					□ No
	Name of Storage Facility	ty	Name		Yes
	Number Street		Number Street		
	·		City State ZIP Code		
	City	State ZIP Code			
Part 9	Identify Pr	operty You Hold o	or Control for Someone E	ise	
-	you hold or contro		omeone else owns? Include a	any property you borrowed from, are storing fo	or,
<u> </u>	No				
<b>!</b>	Yes. Fill in the deta	nils.	Milhorn in the presents?	Deposits the assessed.	Malua
			Where is the property?	Describe the property	Value
	Owner's Name				\$
	Number Street		Number Street		
	City	State ZIP Code	City State	ZIP Code	
Part 1	0: Give Detai	ls About Environn	nental information		
For the	purpose of Part 1	0, the following defir	nitions apply:		
■ <i>Env</i> i	<i>ironmental law</i> me ardous or toxic su	ans any federal, stat bstances, wastes, or	e, or local statute or regulation	on concerning pollution, contamination, releas oil, surface water, groundwater, or other mediu	
m Site	means any location	on, facility, or proper	•	onmental law, whether you now own, operate,	Of
				hazardous waste, hazardous substance, toxic	
sub	stance, hazardous	material, pollutant,	contaminant, or similar term.	,	
Report	all notices, release	es, and proceedings	that you know about, regard	less of when they occurred.	
24. Has	any governmental	unit notified you tha	t you may be liable or potent	ially liable under or in violation of an environm	ental law?
<b>回</b> ,	No Yes. Fill in the deta	nils.			
			Governmental unit	Environmental law, if you know it	Date of notice
:	Name of site		Governmental unit	<u> </u>	
,	U 240			<u></u>	
ī	Number Street		Number Street		
-			City State ZIP Cod	le .	
7	City	State ZIP Code			
•	-nj				

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Debtor 1	Lakisha First Name	Shante	Brown	Case number (if known)	
	) vocisance	MAAG IVAITE LIMIT	· ·		
25. Hav	e vou notified as	v governmental unit of	f any release of hazardous materia	ai?	
<u> </u>	_	., 50.00		•••	
_	Yes. Fill in the d	etails.			
			Governmental unit	Environmental law, if you know it	Date of notice
	Name of site	· · · · · · · · · · · · · · · · · · ·	Governmental unit		
	<del> </del>				
	Number Street		Number Street		
			City State ZIP Code		
			ony out in out		
	City	State ZIP Code			
26. Hav	e you been a pa	rty in any judicial or ad	ministrative proceeding under any	environmental law? Include settlemen	ts and orders.
Ø	No				
	Yes. Fill in the d	etails.			
			Court or agency	Nature of the case	Status of the
	Case title				_
			Court Name	<del>_</del>	Pending
			<u> </u>		On appeal
			Number Street		☐ Concluded
	Case number		- City State ZIP Cod		
			ony onto 21 oou	•	
Part 1	ii: Give Det	tails About Your Bus	iness or Connections to Any	Business	
				eve any of the following connections to	any business?
			in a trade, profession, or other ac		
	☐ A member of ☐ A partner in	• •	pany (LLC) or limited liability partr	iership (LLP)	
	•		ecutive of a corporation		
			g or equity securities of a corpora	ation	
ıəí		above applies. Go to P			
			in the details below for each busi	ness.	
		•	Describe the nature of the busines		number
	Business Name			Do not include Social S	Security number or ITIN.
				EIN:	
	Number Street		Name of accountant on backbacas		
			Name of accountant or bookkeepe	Paus Dushiess existed	
				From To	·
	City	State ZIP Code			
			Describe the nature of the busines		
	Business Name			Do not aicides Social	Security number or ITIN.
				EIN:	
	Number Street		Name of accountant or bookkeepe	Dates business existed	1
				From To	)
	City	State ZIP Code			

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	Middle Name	Shante	Brown	Case number (if known)
			Describe the nature of the business	Employer Identification number  Do not include Social Security number or ITIN
Business Name	· , ,			EIN:
Number Street			Name of accountant or bookkeeper	Dates business existed
City	State	ZIP Code		From To
hìn 2 years bef titutions, credit	-	•	cy, did you give a financial stateme	nt to anyone about your business? Include all financial
Yes. Fill in the	details belo	w.		
			Date issued	
Name			MM / DD / YYYY	
Number Street				
City	State	ZIP Code		
12: Sign Bei	low			
nave read the answers are true connection with	nswers on the	. I understand tcy case can	d that making a false statement, con	ments, and I declare under penalty of perjury that the cealing property, or obtaining money or property by frau prisonment for up to 20 years, or both.
nave read the answers are true connection with	nswers on the and correct the abankrup 1341, 1519,	. I understand tcy case can	d that making a false statement, con	cealing property, or obtaining money or property by frau prisonment for up to 20 years, or both.
nave read the answers are true connection with U.S.C. §§ 152, Signature of De	nswers on the and correct the abankrup 1341, 1519, 1510, 1510 btor 1	t understand toy case can and 3571.	that making a false statement, con result in fines up to \$250,000, or important the statement of Debtor 2  Date	prisonment for up to 20 years, or both.
nave read the answers are true connection with U.S.C. §§ 152, Signature of De Date 10/01/20 id you attach ac	nswers on the and correct the abankrup 1341, 1519, 1510, 1510 btor 1	t understand toy case can and 3571.	that making a false statement, con result in fines up to \$250,000, or important the statement of Debtor 2  Date	cealing property, or obtaining money or property by frau prisonment for up to 20 years, or both.
nave read the answers are true connection with U.S.C. § 152, Signature of De Date 10/01/20 id you attach ad	nswers on the and correct the abankrup 1341, 1519, 1510, 1510 btor 1	t understand toy case can and 3571.	that making a false statement, con result in fines up to \$250,000, or important the statement of Debtor 2  Date	prisonment for up to 20 years, or both.
nave read the answers are true connection with U.S.C. §§ 152, Signature of De Date 10/01/20 id you attach ad No Yes	nswers on the and correct the abankrup 1341, 1519, btor 1	I understand of the control of the c	that making a false statement, con result in fines up to \$250,000, or important the statement of Debtor 2  Date	prisonment for up to 20 years, or both.  2
have read the answers are true a connection with U.S.C. §§ 152, Signature of De  Date 10/01/20 id you attach ad  No Yes	nswers on the and correct the abankrup 1341, 1519, btor 1	Junderstand otcy case can and 3571.	that making a false statement, con result in fines up to \$250,000, or im  Signature of Debtor 2  Date	prisonment for up to 20 years, or both.  2  ividuals Filing for Bankruptcy (Official Form 107)?

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Fill in this inf	formation to id-	entify your case:		
Debtor 1	Lakisha First Name	Shante Middle Name	Brown Last Name	
Debtor 2				
(Spouse, if filing)		Middle Name	Last Name	
United States E	Bankruptcy Court i	for the: Eastern District of Virginia		
Case number (If known)				
		<del> </del>	<del></del>	

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

if you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

For any creditors that you listed in Part 1 of Schedule D: C information below.	er any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the formation below.						
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C7					
Creditor's	☐ Surrender the property.	□ No					
name:	Retain the property and redeem it.	☐ Yes					
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.						
	Retain the property and [explain]:						
Creditor's	☐ Surrender the property.	□ No					
name:	Retain the property and redeem it.	Yes					
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.						
cooming cook.	Retain the property and [explain]:						
Creditor's	☐ Surrender the property.	□ No					
name:	Retain the property and redeem it.	Yes					
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.						
	Retain the property and [explain]:						
Creditor's	☐ Surrender the property.	□ No					
name:	Retain the property and redeem it.	☐ Yes					
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.						
	☐ Retain the property and [explain]:						
		•					

12/15

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For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property	ty leases Will the lease be assume
.essor's name:	□ No
Description of leased property:	☐ Yes
.essor's name:	□ No
Description of leased property:	☐ Yes
_essor's name:	□ No
Description of leased property:	☐ Yes
essor's name:	
Description of leased property:	☐ Yes
essor's name:	□ No
Description of leased property:	☐ Yes
.essor's name:	□ No
Description of leased property:	☐ Yes
essor's name:	□ No
Description of leased property:	☐ Yes

Case 19-73637-SCS Doc 1 Filed 10/01/19 Entered 10/01/19 10:37:19 Desc Main Document Page 66 of 72 Fill in this information to identify your case Check one box only as directed in this form and in-Form 122A-1Supp Lakisha Shante Brown Debtor 1 1. There is no presumption of abuse. Debtor 2 (Spouse, if filing) First Name 2. The calculation to determine if a presumption of last Name abuse applies will be made under Chapter 7 United States Bankruptcy Court for the: Eastern District of Virginia Means Test Calculation (Official Form 122A-2). 3. The Means Test does not apply now because of Case number (If known) qualified military service but it could apply later. Check if this is an amended filing Official Form 122A-1 Chapter 7 Statement of Your Current Monthly Income 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form. Part 1: **Calculate Your Current Monthly Income** 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filing with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions 791.94 (before all payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not 572.22 filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, Debtor 1 Debtor 2 Gross receipts (before all deductions) Ordinary and necessary operating expenses Сору 0 0 Net monthly income from a business, profession, or farm 6. Net income from rental and other real property Debtor 1 Debtor 2 0 Gross receipts (before all deductions) 0-\$ Ordinary and necessary operating expenses Сору Net monthly income from rental or other real property 0 O 0 Interest, dividends, and royalties

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Debto	or 1	Lakisha First Name Middle Nam	Shante  Last Nerrie	Brown		Case number (if known)		
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
8.	Unempl	oyment compensatio	n			s 0	<u>.</u> .	
			contend that the amour		efit	V	V	
			Instead, list it here:					
				_				
	-	•		<b>-</b>	_			
		n or retirement incom under the Social Secur	e. Do not include any ar ity Act.	nount received that w	vas a	s0	\$	
	Do not it as a vict	include any benefits red tim of a war crime, a cr	es not listed above. Sponserved under the Social sime against humanity, of the sources on a separate	Security Act or paymer international or don	ents receive nestic			
						\$0	\$	
						\$0	\$	
	Total a	mounts from separate	pages, if any.			+ \$0	+ \$	
			monthly income. Add li Column A to the total fo		each	\$1,364.16 <sup>4</sup>	<b>\$</b> 0	\$ 1,364.16  Total current monthly income
Pa	rt 2:	Determine Whethe	or the Means Test A	pplies to You				
12.	Calculat	te your current monti	nly income for the year	. Follow these steps:			·	- manufacture (Manufacture Manufacture Man
	12a. C	opy your total current i	monthly income from line	• 11		Coj	py line 11 here 🖜	<u>\$ 1,364.16</u>
	М	fultiply by 12 (the numb	per of months in a year).					x 12
	12b. Tl	he result is your annua	I income for this part of t	the form.			12b.	\$ <u>16,369.9</u> 2
13.	Calcula	te the median family	income that applies to	you. Follow these st	teps:			
	Fill in the	e state in which you liv	<b>e</b> .	VA	derivate is some 1 of			
•	Fill in th	e number of people in	your household.	12	-		<del></del>	
	Fill in the	e median family incom	e for your state and size	of household	•••••••		13.	<u>\$</u> 68,,766.00
			lian income amounts, go list may also be availabl					
14.	How do	the lines compare?						
	14a, 📕	Line 12b is less than Go to Part 3.	or equal to line 13. On th	ne top of page 1, chec	ck box 1, <i>Th</i>	ere is no presumption	of abuse.	
	14b. 🖵	Line 12b is more than Go to Part 3 and fill or	line 13. On the top of particular top of particular tops	age 1, check box 2, 7	The presump	otion of abuse is deter	mined by Form 122A-	<b>2</b> .
Рa	rt 3:	Sign Below						
		By signing bere, I decl	are under penalty of perj	ury that the informati	ion on this s	tatement and in any a	ttachments is true and	I correct.
	,	× / 1/2	a Short	a V	×	•		
	(	Signature of Debtor 1	A MININ		Si	gnature of Debtor 2		
	'	Date 10/01/2019	l		Da	ate		
		MM / DD /Y			3.	MM / DD /YYYY	_	
		If you checked line	14a, do NOT fill out or f	ile Form 122A-2.				
		If you checked line	14b, fili out Form 122A-	-2 and file it with this	form.		errer in particular contraine e anni un i se met summerme com cumbanhe	enniber die western in der weede wis einstelle kommen (die heine de stelle eine eine eine eine eine eine eine

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA

<u> </u>
In re Lakisha Shante Brown
Case No.
Chapter 7
Debtor(s)
COVER SHEET FOR LIST OF CREDITORS
I hereby certify under penalty of perjury that the master mailing list of creditors submitted either on computer diskette or by a typed hard copy in scannable format, with Request for Waiver attached, is a true, correct and complete listing to the best of my knowledge.
I further acknowledge that (1) the accuracy and completeness in preparing the creditor listing are the shared responsibility of the debtor and the debtor's attorney, (2) the court will rely on the creditor listing for all mailings, and (3) that the various schedules and statements required by the Bankruptcy Rules are not used for mailing purposes.
Master mailing list of creditors submitted via:
(a)X computer diskette listing a total of35 creditors; or
(b) scannable hard copy, with Request for Waiver attached, consisting of pages, listing a total of creditors
Robin Shorte P
Joint Debtor
Date: 10/01/2019 [Check if applicable] Creditor(s) with foreign addresses included on disk/hard copy.
EP 1 (2002)

[diskcs ver. R-1/2003]

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#### Lakisha Shante Brown

Prestige Financial Services Inc. P.O. Box 26707 Salt Lake City, UT 84126-0707

Portfolio Recovery Associates/ Brylane Home 120 Corporate Blvd. Norfolk, VA 23502

Portfolio Recovery Associates/ Jessica London 120 Corporate Blvd. Norfolk, VA 23502

Sentara Healthcare P.O. Box 791168 Baltimore, MD 21279-1168

WebBank/Fingerhut P.O. Box 1269 Greenville, SC 29602

Portfolio Recovery Associates/ Capital One 120 Corporate Blvd. Norfolk, VA 23502

BB&T Bank 200 West Second St. Winston-Salem, NC 27101

Progressive Leasing 256 Data Dr. Draper, UT 84020

Credit Control Corporation

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### Lakisha Shante Brown

P.O. Box 120568 Newport News, VA 23612

LTD Financial Services/ Ashley Stewarts 3200 Wilcrest Rd. Suite 600 Houston, TX 77042-6000

Radius Global Solutions LLC,/ First Premier Bank 256 Data Dr.
Draper, UT 84020

Comenity Bank/ Roamans P.O. Box 182789 Columbus, OH 43218

Comenity Bank/ Women Within P.O. Box 182789 Columbus, OH 43218

Comenity Bank/ Brylane Home P.O. Box 182789 Columbus, OH 43218

Comenity Bank/ Jessica London P.O. Box 182789 Columbus, OH 43218

Comenity Bank/ Victoria Secrets P.O. Box 182789 Columbus, OH 43218

Comenity Bank/ Full Beauty P.O. Box 182789 Columbus, OH 43218

Comenity Bank/ NY & CO P.O. Box 182789 Columbus, OH 43218

Credit Control Corporation 11821 Rock Landing Dr. Newport News, VA 23606

Credit Control Corporation 11821 Rock Landing Dr.

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### Lakisha Shante Brown

Newport News, VA 23606

Comenity Bank/ NY & CO P.O. Box 182789 Columbus, OH 43218

Resurgent/ LVNV Funding P.O. Box 1269 Greenville, SC 29602

Colony Bank/ Midnight Velvet 1112 7th Ave Monroe, WI 53566

Web Bank/ Fingerhut 6250 Ridgewood Rd. Saint Cloud, MN 56303

TBOM/CONTFIN 4550 New Linden Hill Rd. #400 Wilmington, DE 19808

Web Bank/ Fingerhut 6250 Ridgewood Rd. Saint Cloud, MN 56303

Receivables Management System 6250 Ridgewood Rd. Saint Cloud, MN 56303

Patient First 332 Newtown Rd. Virginia Beach, VA 23462

PNC Bank 222 Delaware Ave Wilmington, DE 19899

Navy Federal Credit Union P.O. Box 3000 Merrifield, VA 22119-3000

Bank of America 100 North Tryon St. Case 19-73637-SCS Doc 1 Filed 10/01/19 Entered 10/01/19 10:37:19 Desc Mair Document Page 72 of 72

Lakisha Shante Brown

Charolette, NC 28255

Geico Insurance 5260 Western Avenue Chevy Chase, MD 20815